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(12) **United States Patent**  
**Campbell et al.**

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(54) **MAGNETIC-ANCHORED ROBOTIC SYSTEM**

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(73) Assignee: **Bio-Medical Engineering (HK) Limited**, Hong Kong SAR (CN)

(\*) Notice: Subject to any disclaimer, the term of this patent is extended or adjusted under 35 U.S.C. 154(b) by 565 days.

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(65) **Prior Publication Data**  
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**Related U.S. Application Data**

(63) Continuation-in-part of application No. 13/871,915, filed on Apr. 26, 2013, now Pat. No. 10,065,323.  
(Continued)

(51) **Int. Cl.**  
*A61B 34/00* (2016.01)  
*A61B 19/00* (2006.01)  
(Continued)

(52) **U.S. Cl.**  
CPC ..... *A61B 34/73* (2016.02); *A61B 17/00234* (2013.01); *A61B 17/3417* (2013.01);  
(Continued)

(58) **Field of Classification Search**  
CPC ... A61B 2034/302; A61B 34/73; A61B 34/76; A61B 17/3417  
See application file for complete search history.

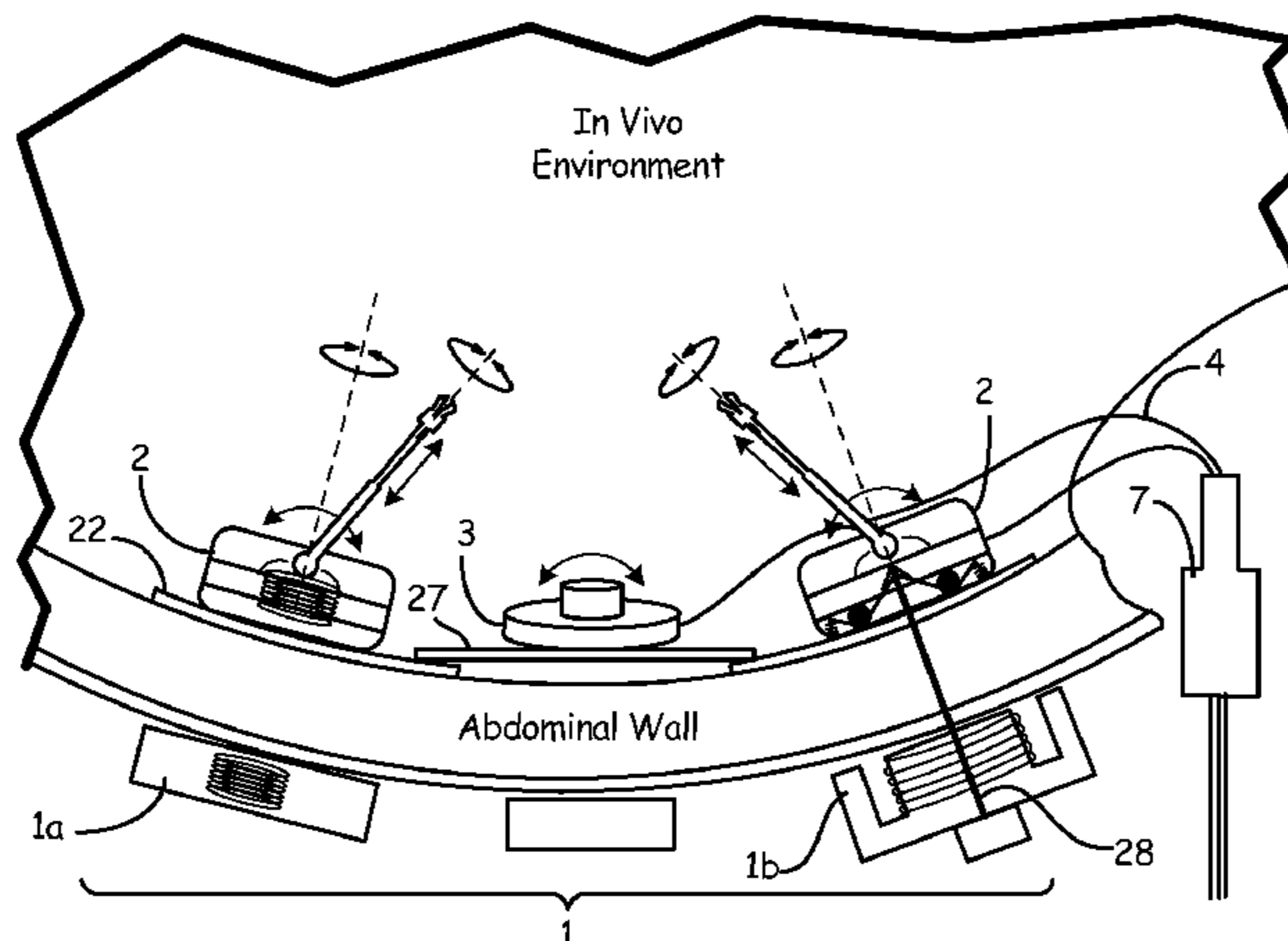
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(74) *Attorney, Agent, or Firm* — Baker & McKenzie LLP

(57) **ABSTRACT**  
Present example embodiments relate generally to a surgical system comprising an internal anchor configurable to be inserted into and positioned inside a cavity of a body. The surgical system further comprises an external anchor assembly configurable to magnetically couple to the internal anchor assembly. The external anchor assembly may comprise a magnetic assembly. The magnetic assembly may include one or more superconducting magnets configurable to generate a magnetic field. The magnetic assembly may further include a conductive housing for receiving the one or more superconducting magnets. The external anchor assembly may further include a temperature control section configurable to control a temperature of the one or more superconducting magnets via the conductive housing. The external anchor assembly may further include an external anchor body configurable to receive the magnetic assembly  
(Continued)



and the temperature control section. The external anchor body may be fixably positionable outside of the body.

**36 Claims, 37 Drawing Sheets**

**Related U.S. Application Data**

- (60) Provisional application No. 61/718,252, filed on Oct. 25, 2012, provisional application No. 61/638,828, filed on Apr. 26, 2012.
- (51) **Int. Cl.**  
*A61B 17/34* (2006.01)  
*A61B 17/00* (2006.01)  
*A61B 34/30* (2016.01)  
*A61B 90/00* (2016.01)
- (52) **U.S. Cl.**  
 CPC ..... *A61B 19/20* (2013.01); *A61B 19/2203* (2013.01); *A61B 34/30* (2016.02); *A61B 34/76* (2016.02); *A61B 17/3423* (2013.01); *A61B 2017/00283* (2013.01); *A61B 2017/00411* (2013.01); *A61B 2017/00876* (2013.01); *A61B 2017/3484* (2013.01); *A61B 2019/2215* (2013.01); *A61B 2019/2253* (2013.01); *A61B 2019/2292* (2013.01); *A61B 2019/5227* (2013.01); *A61B 2034/302* (2016.02); *A61B 2090/371* (2016.02); *Y10S 901/09* (2013.01); *Y10S 901/34* (2013.01); *Y10S 901/41* (2013.01); *Y10T 428/13* (2015.01)

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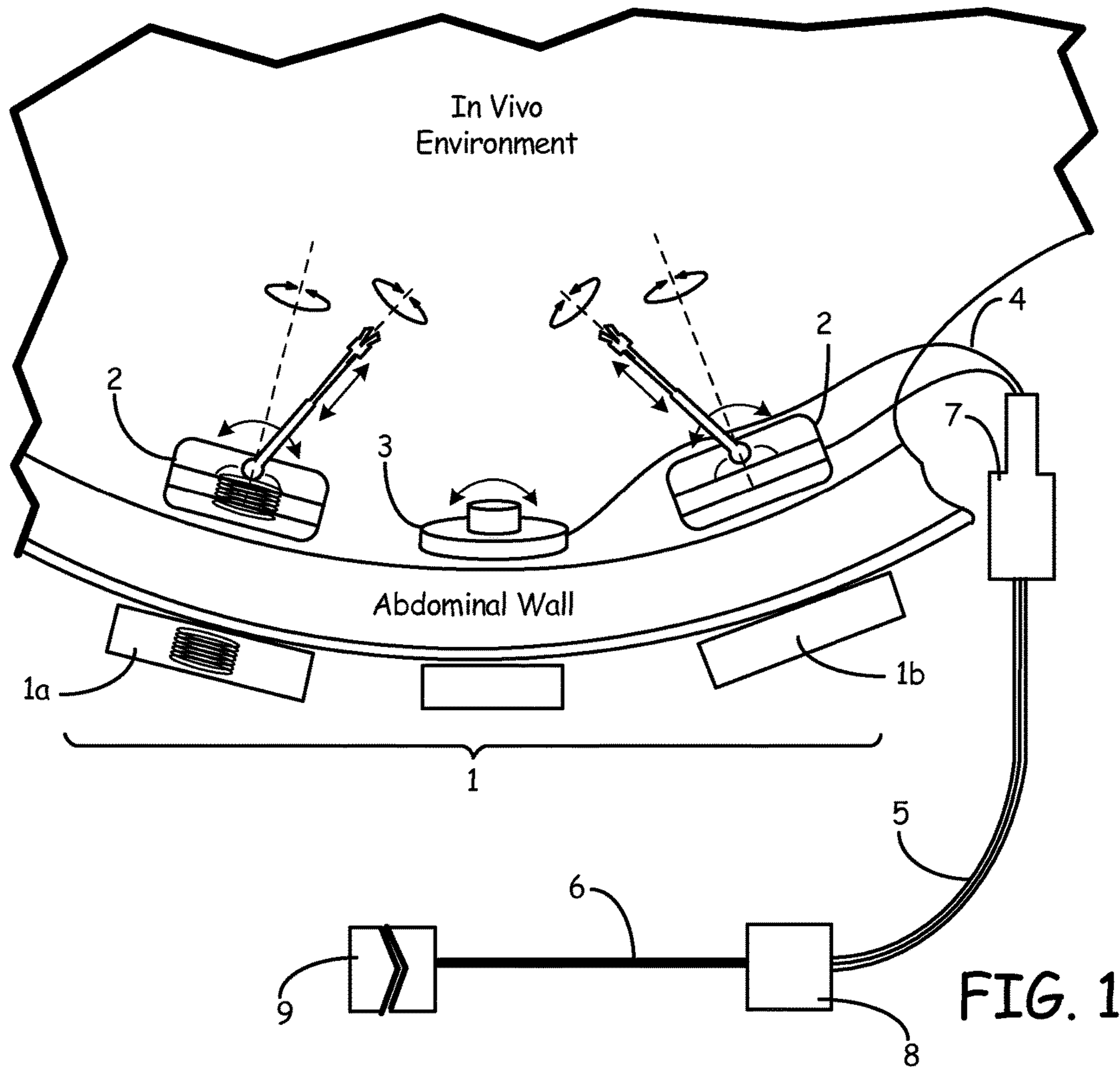


FIG. 1

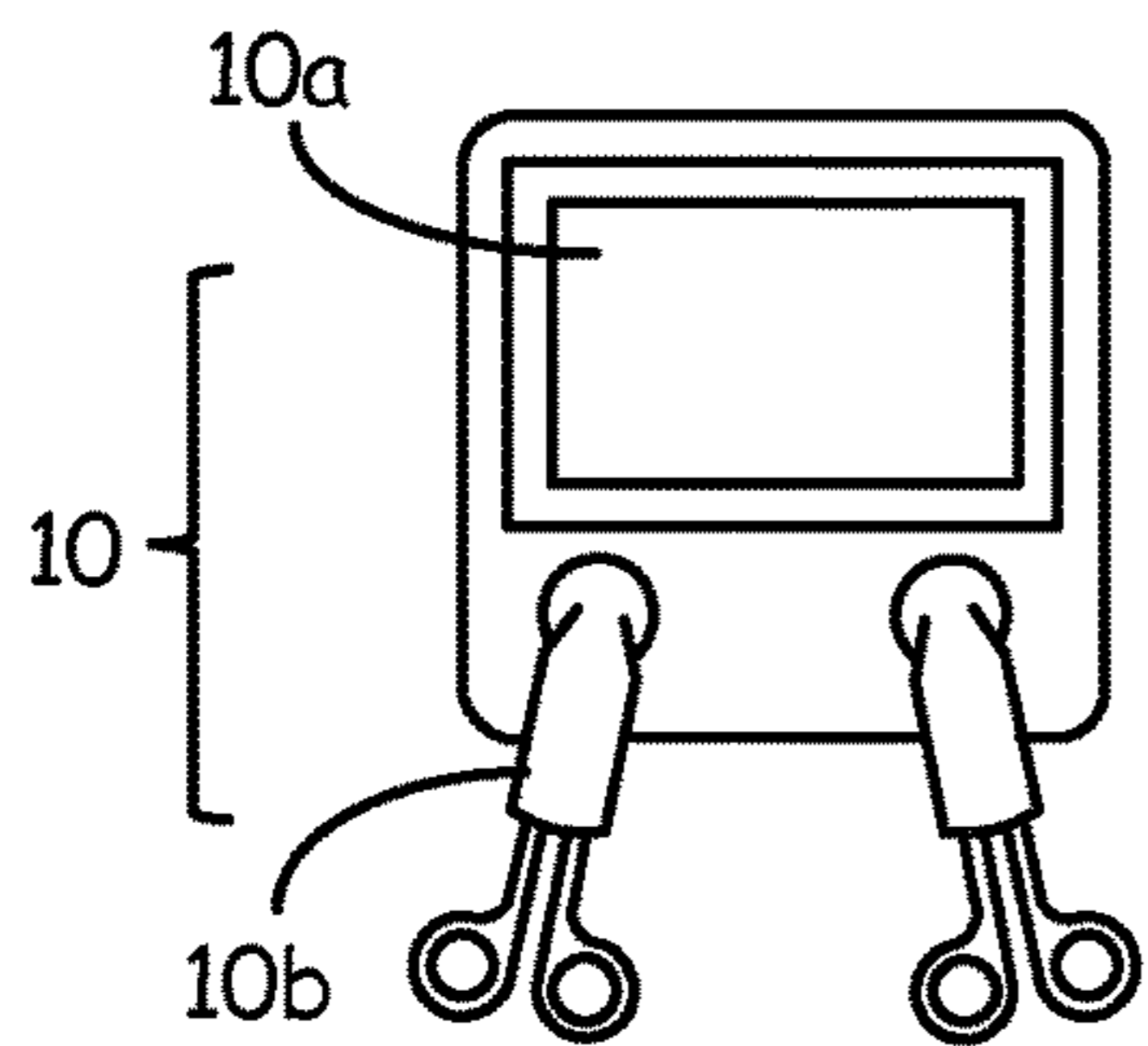


FIG. 1A

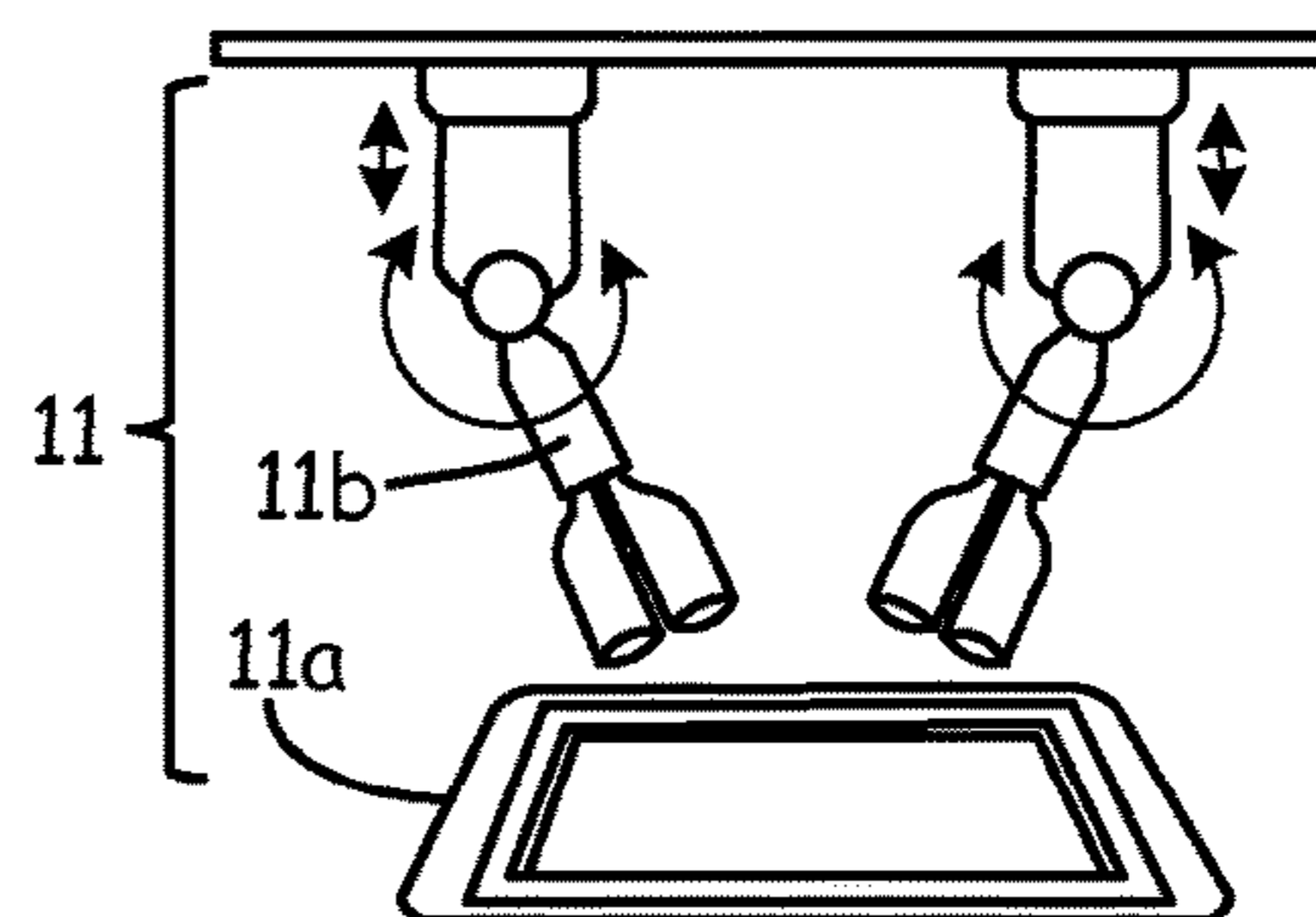


FIG. 1B

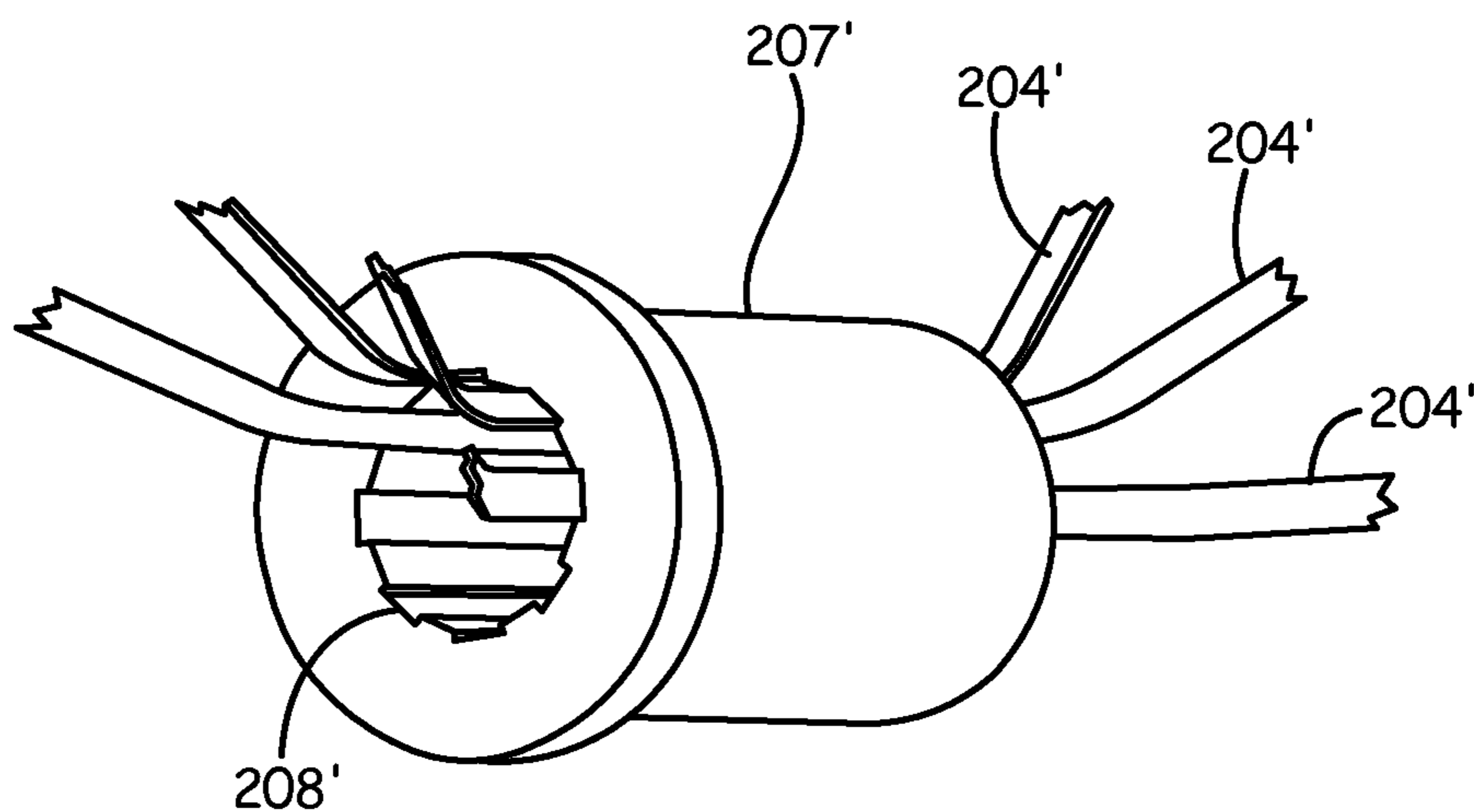


FIG. 2A

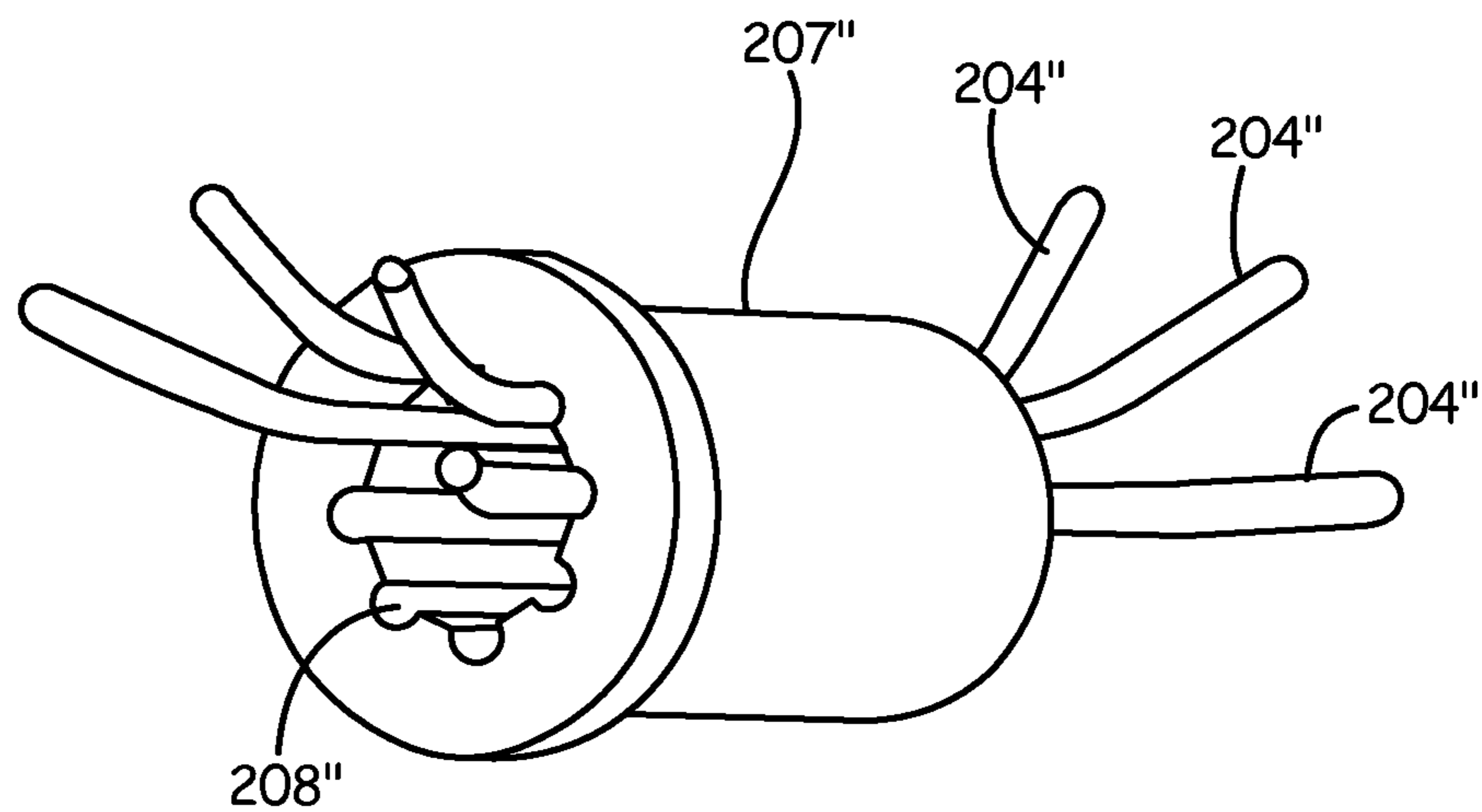


FIG. 2B

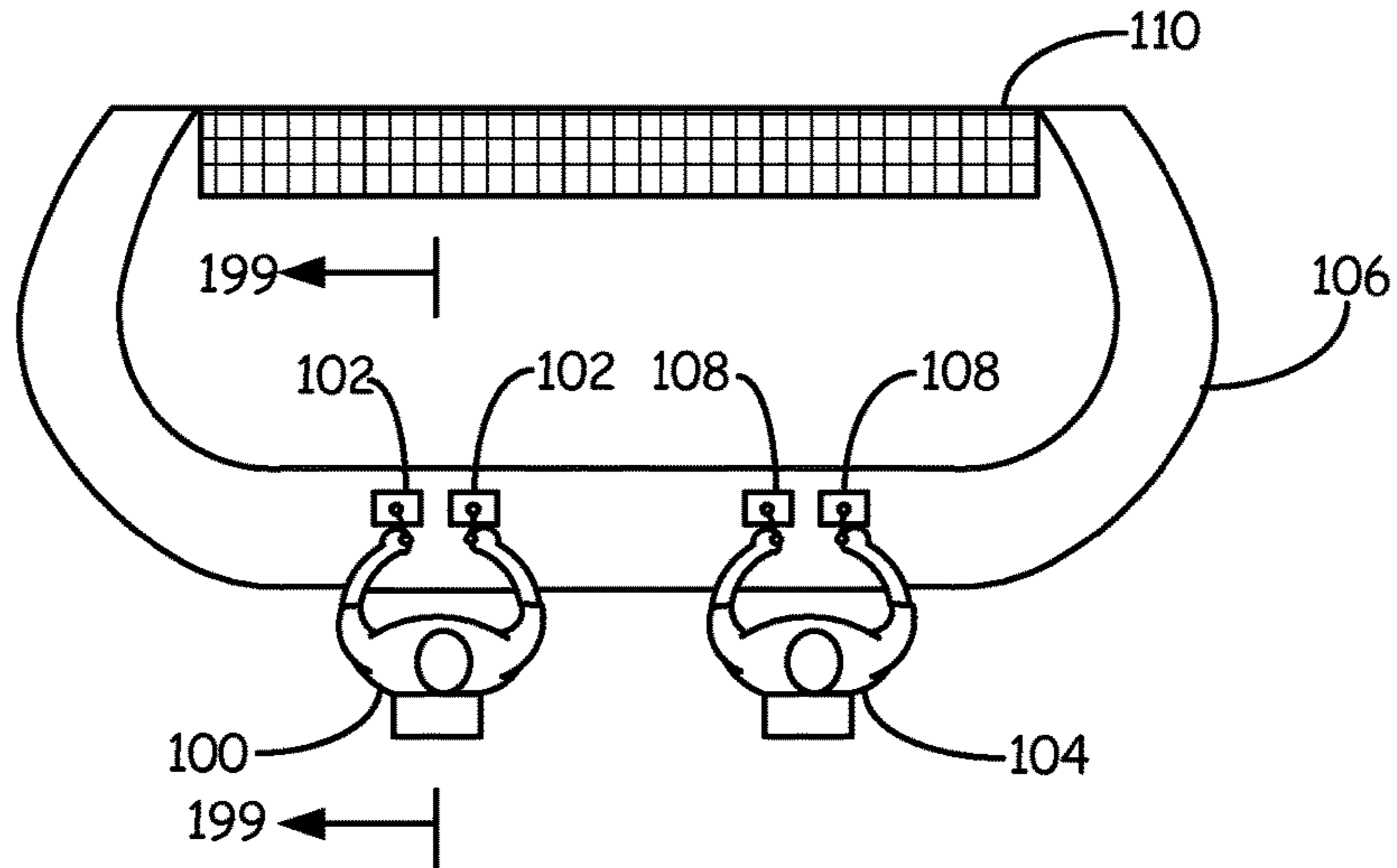


FIG. 3

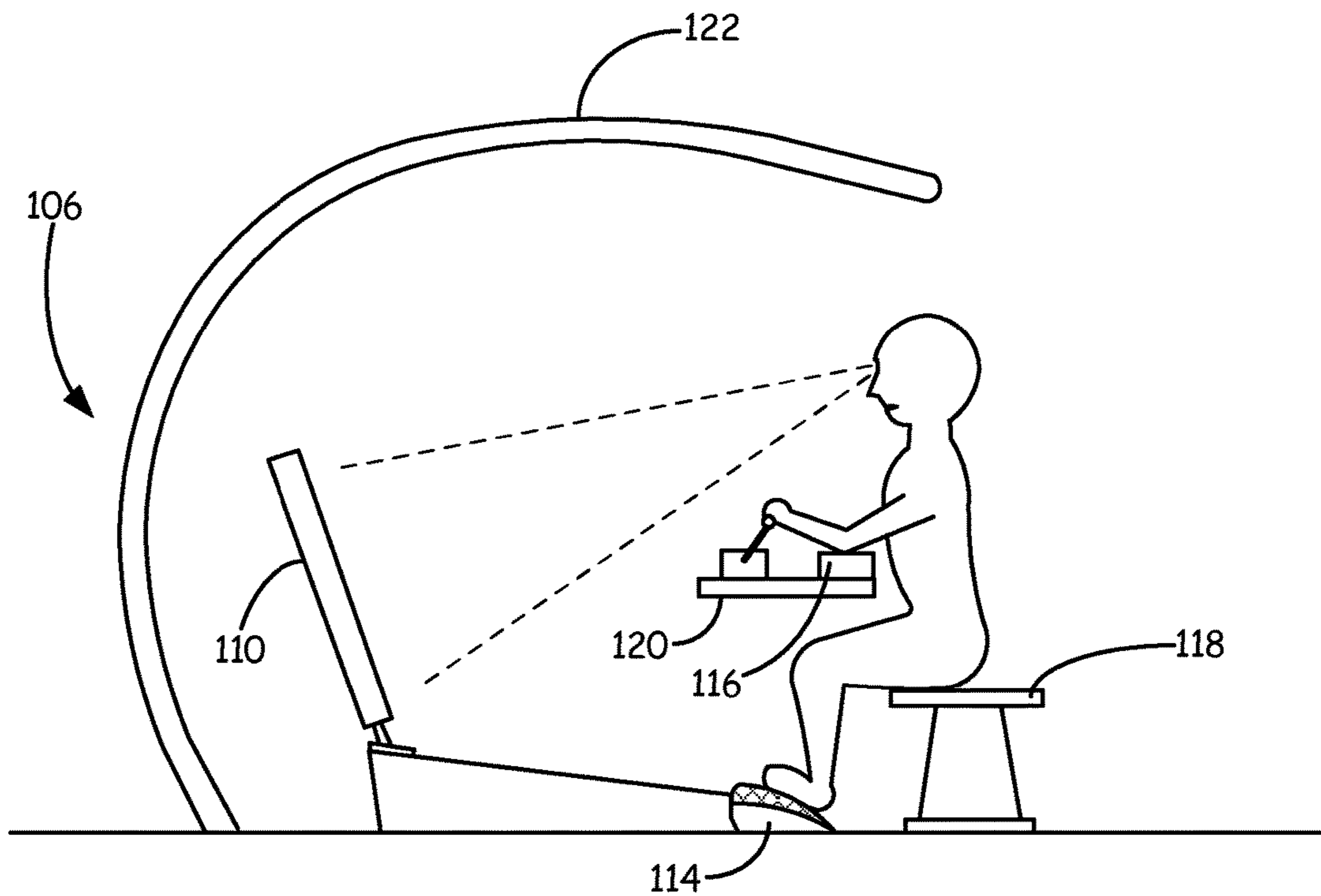
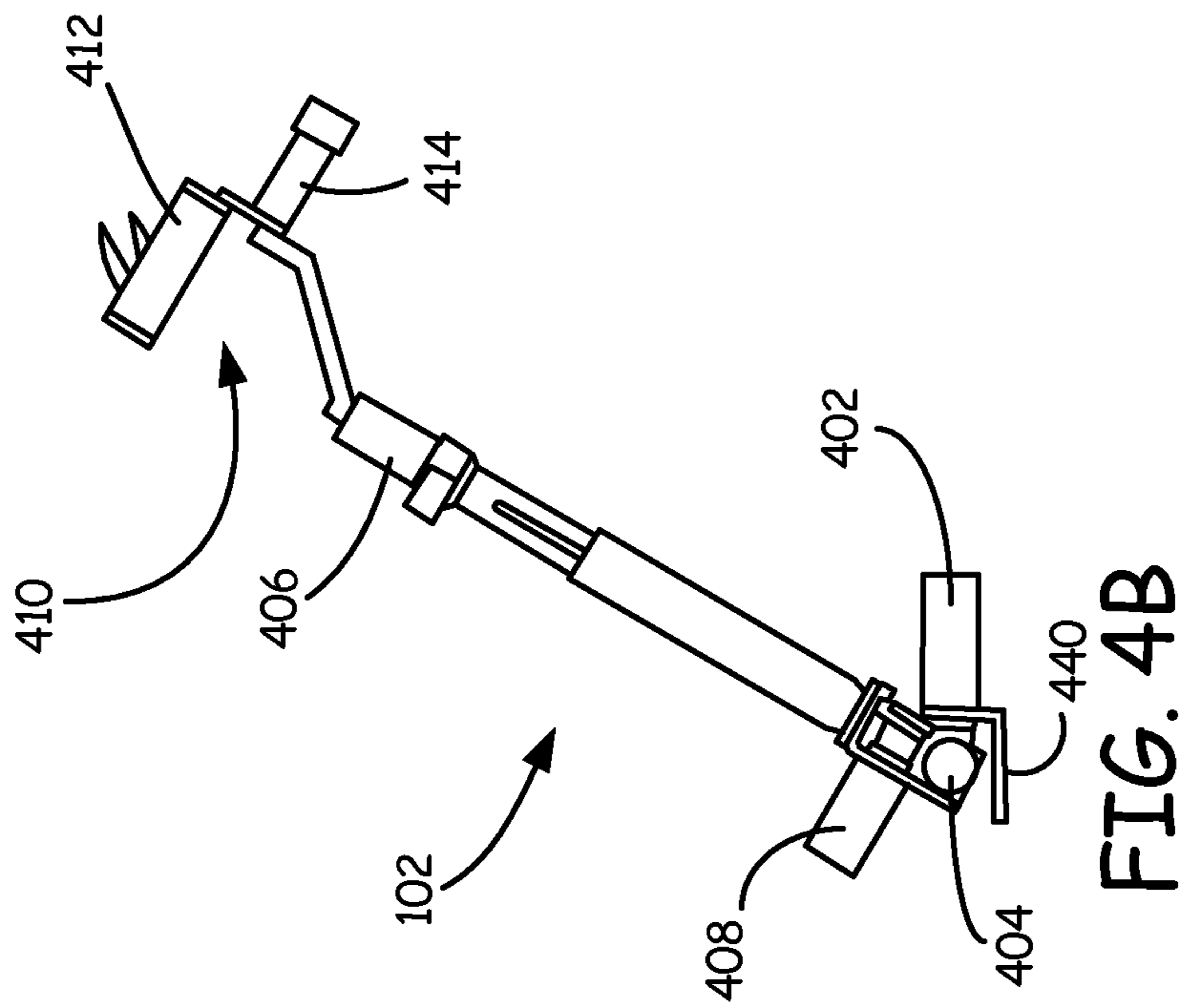
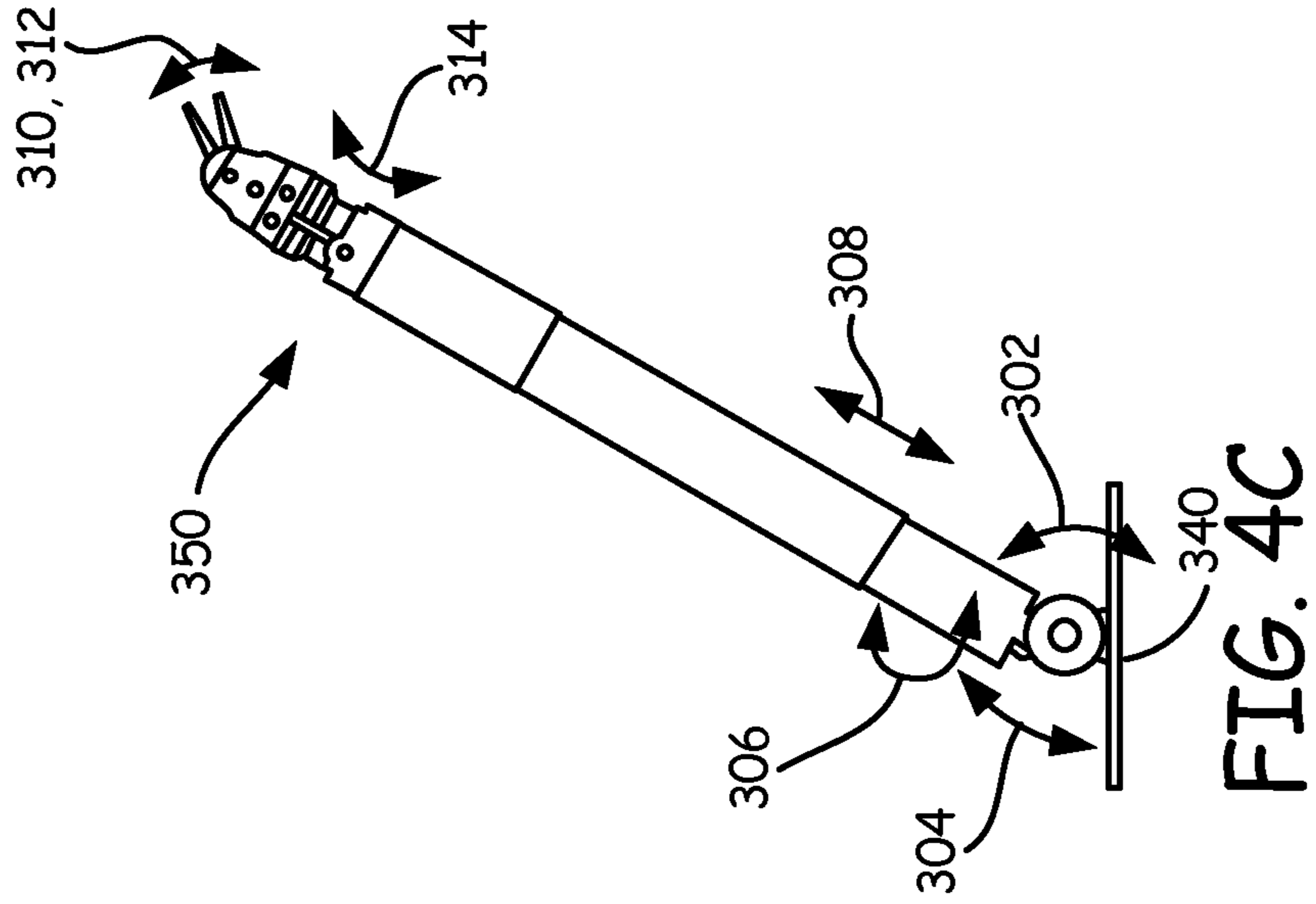
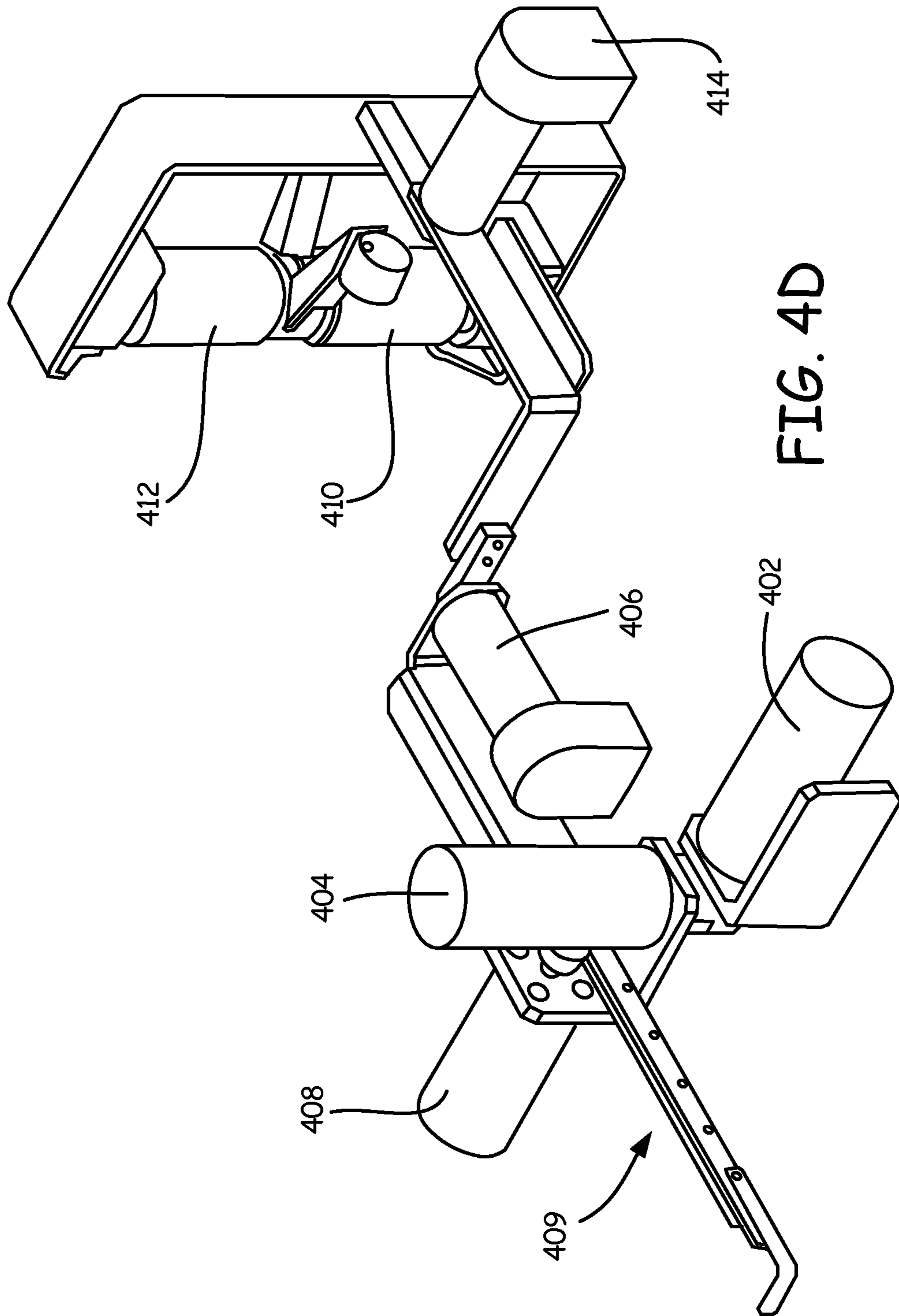


FIG. 4A







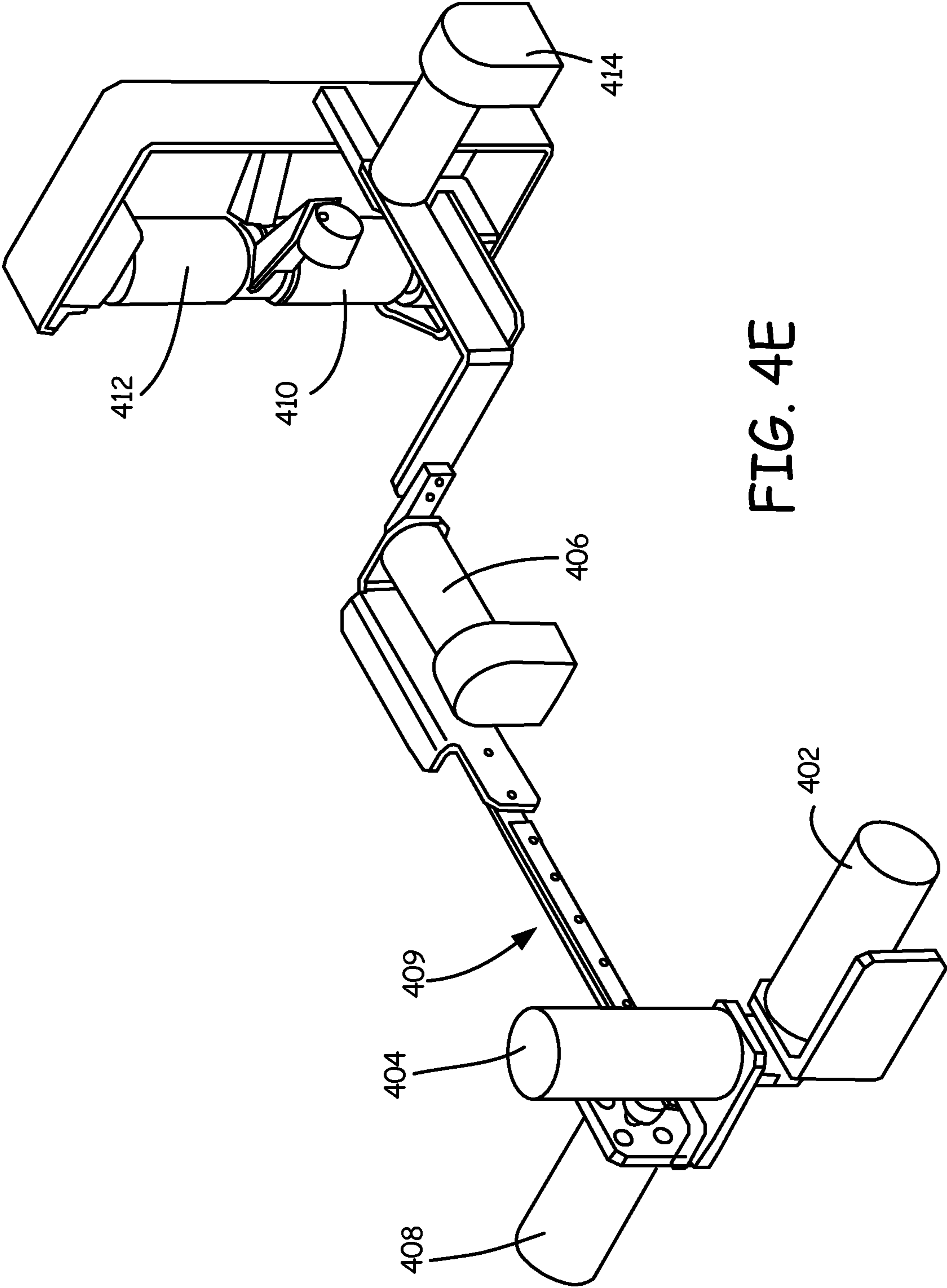


FIG. 4E

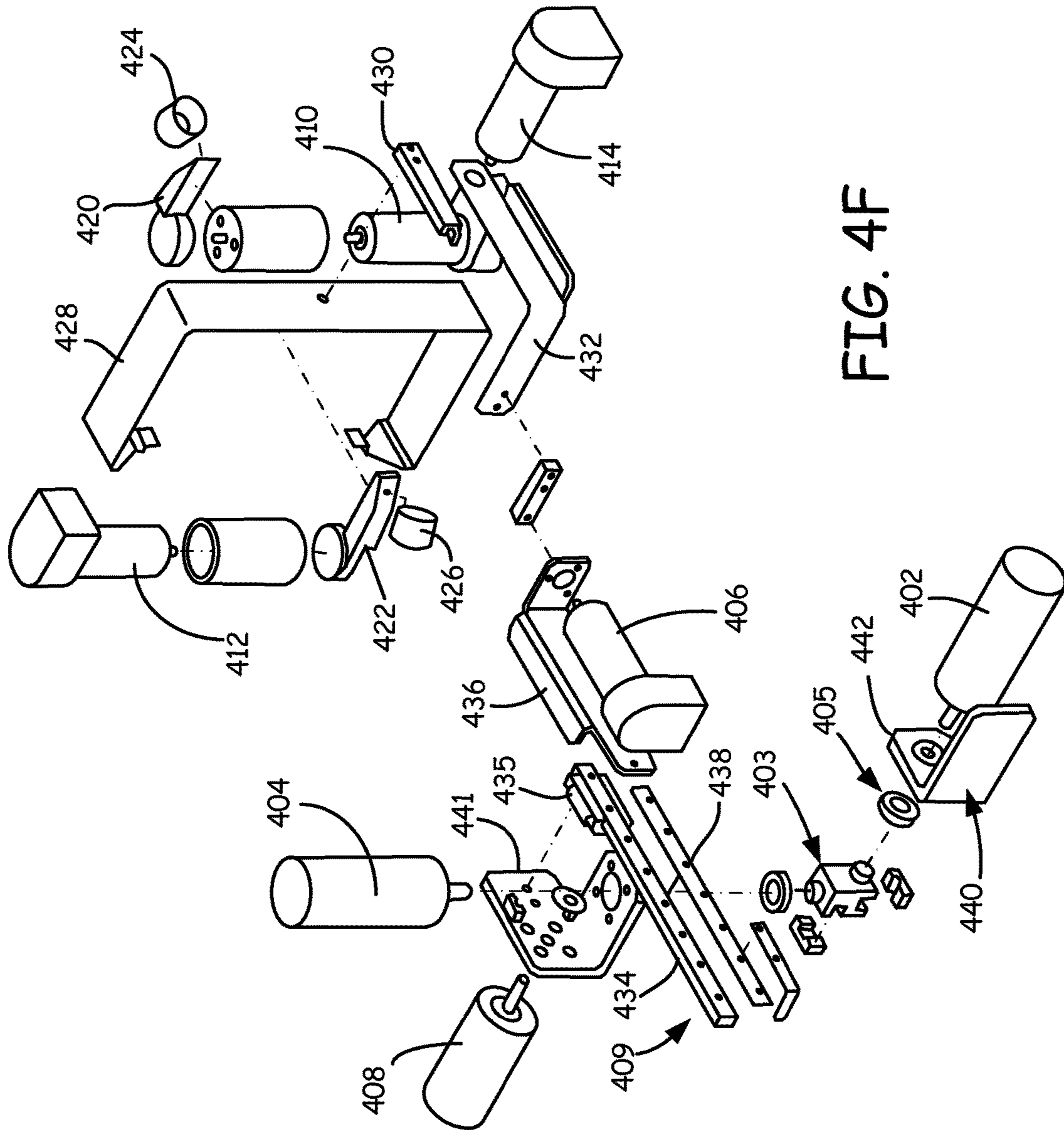


FIG. 4F

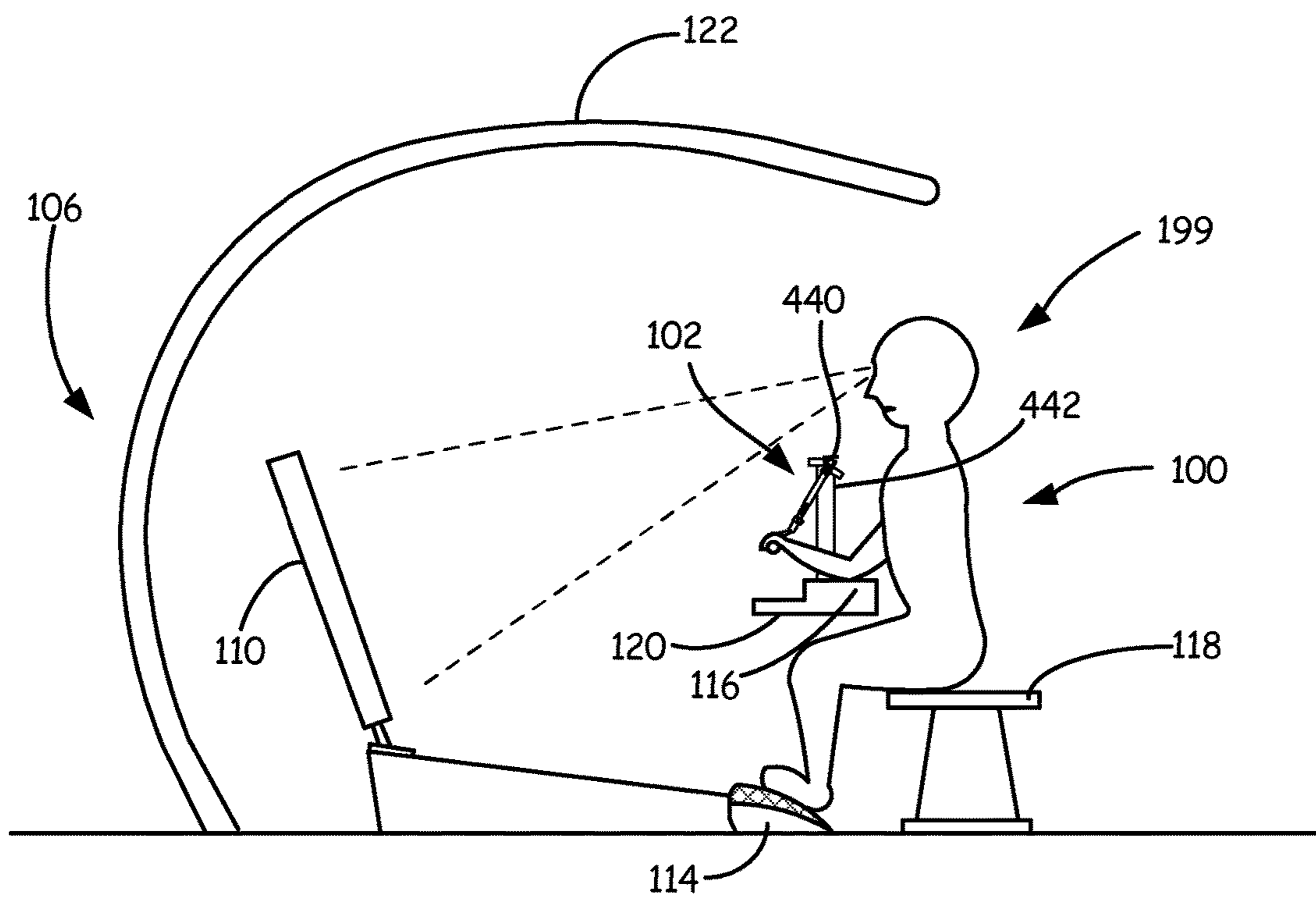


FIG. 4G

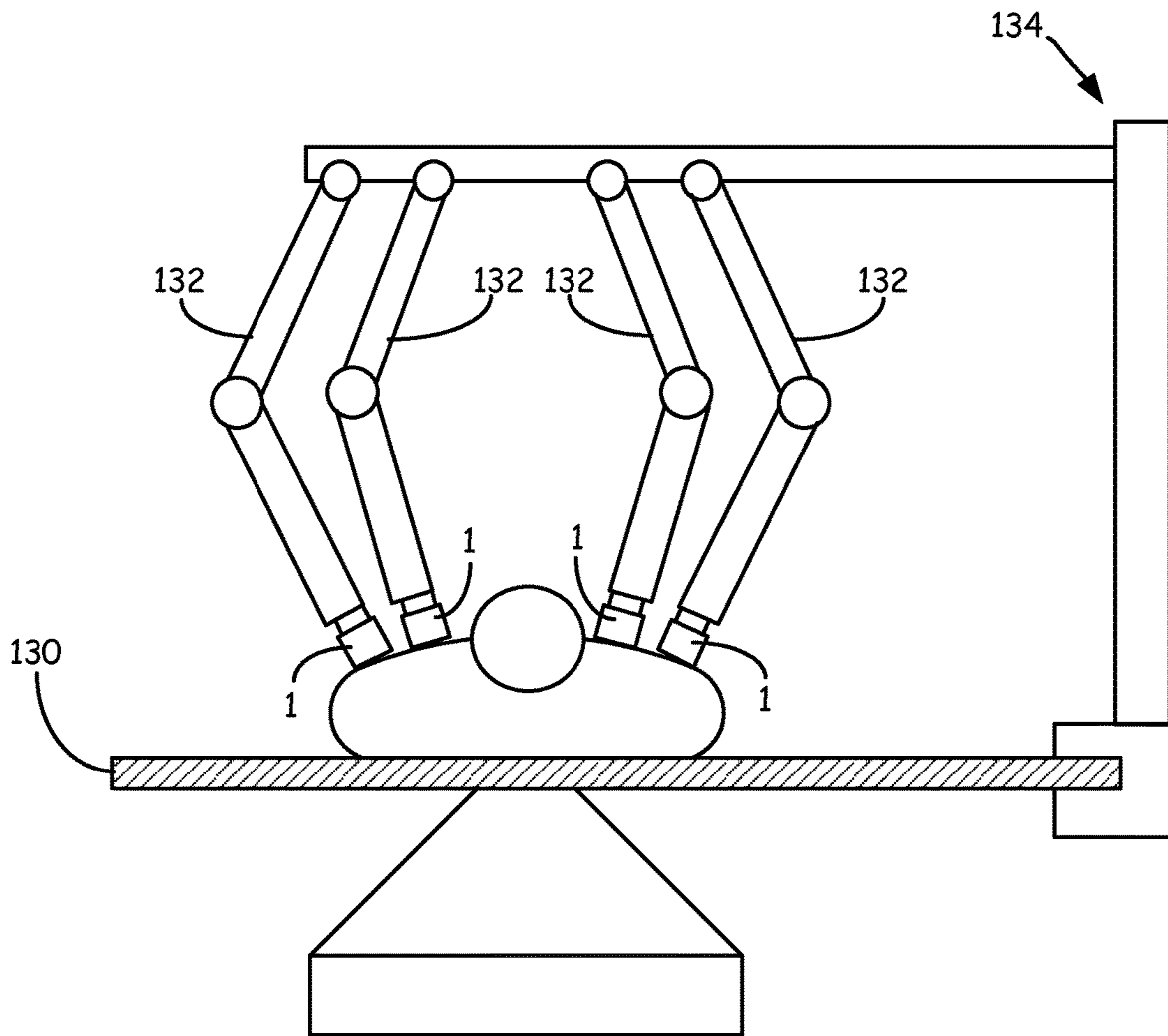


FIG. 5

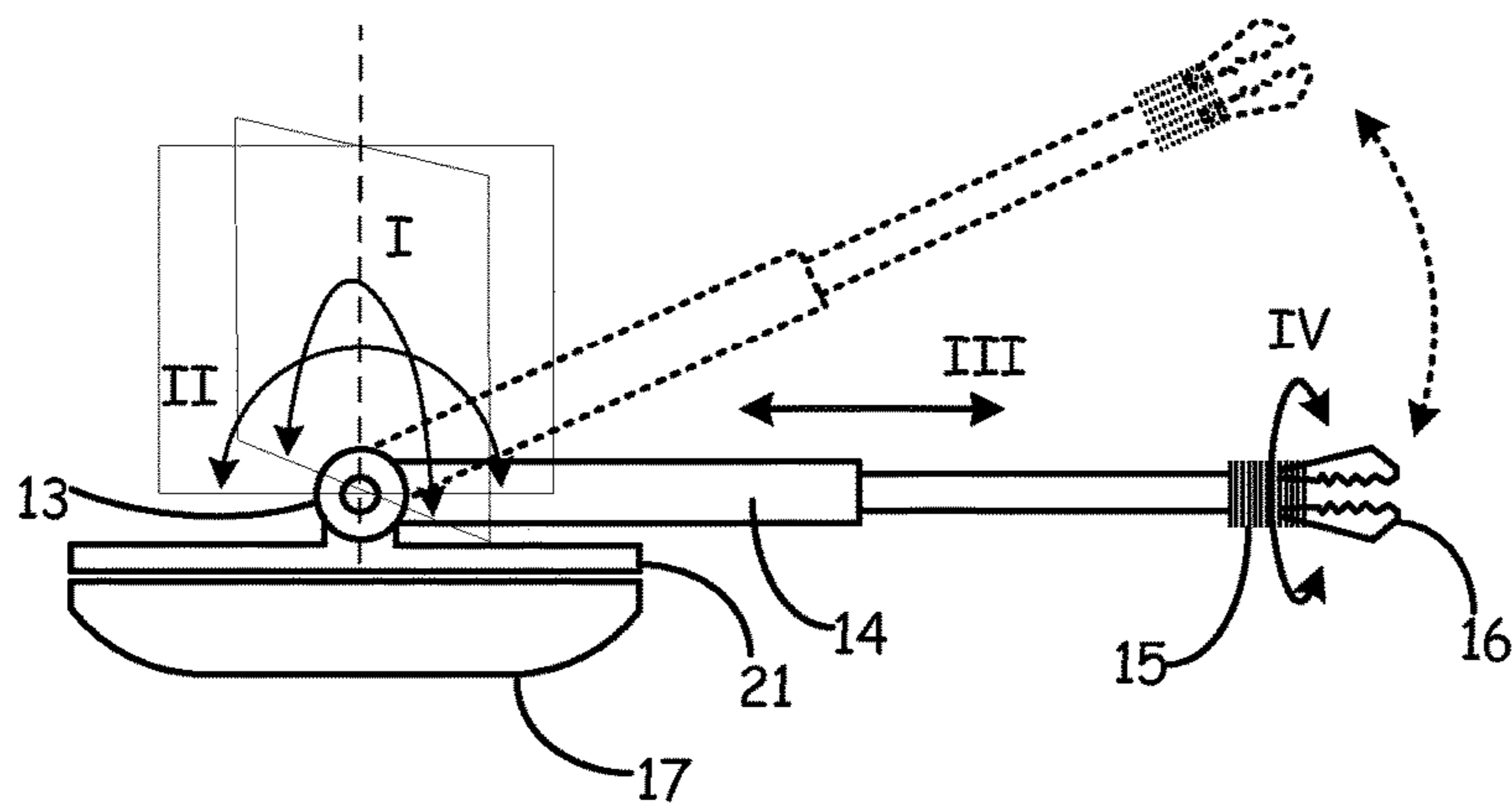


FIG. 6A

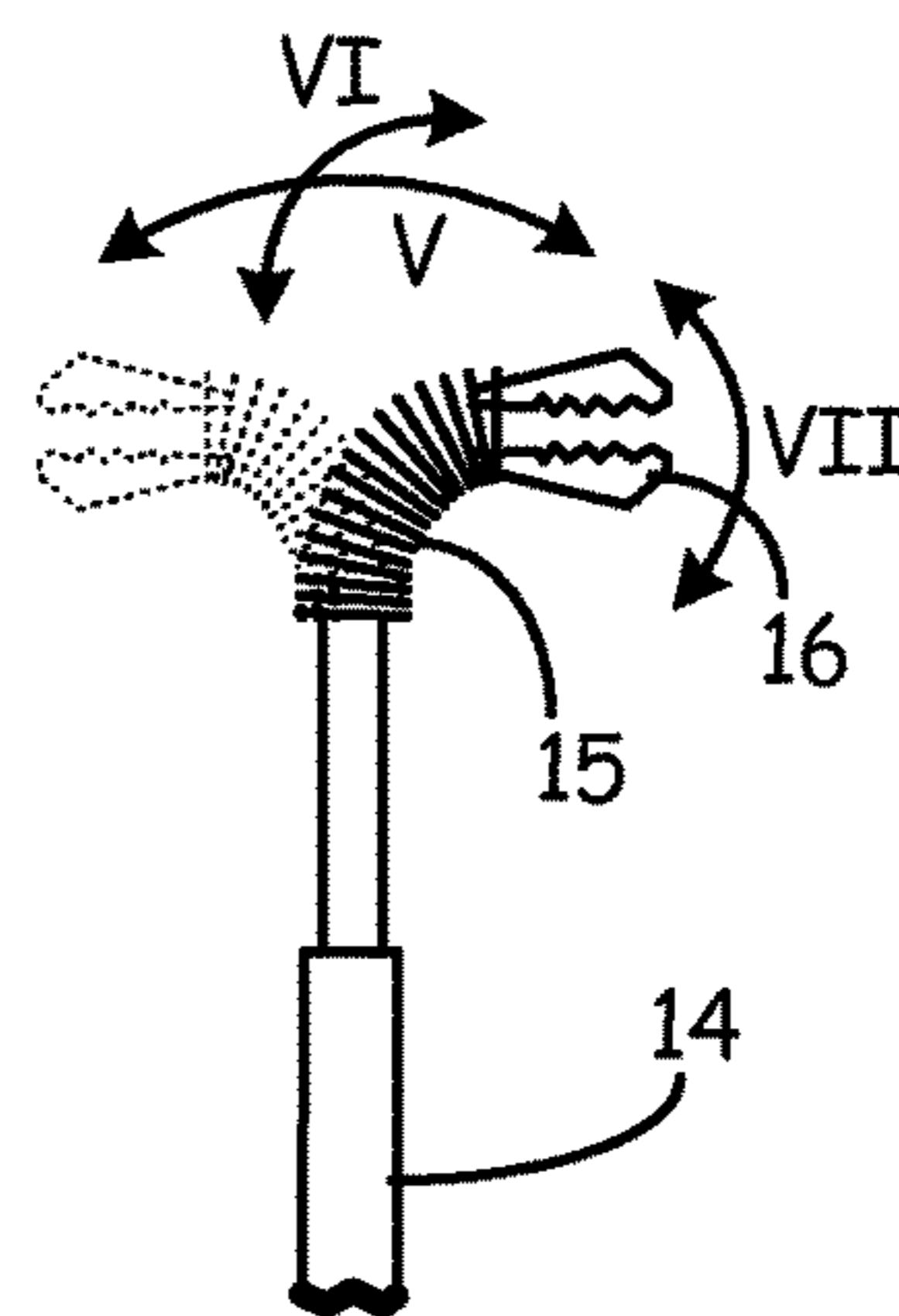


FIG. 6B

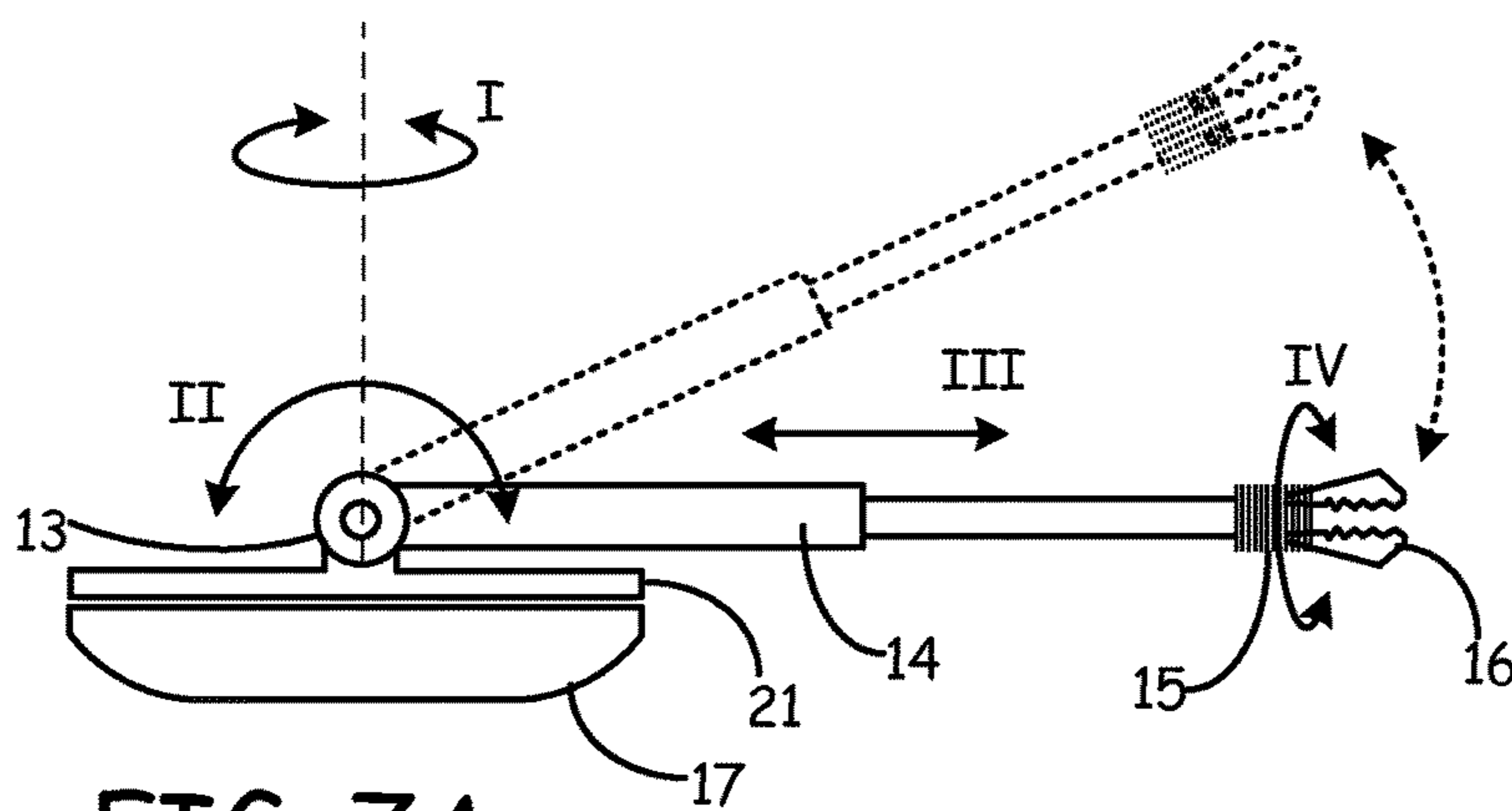


FIG. 7A

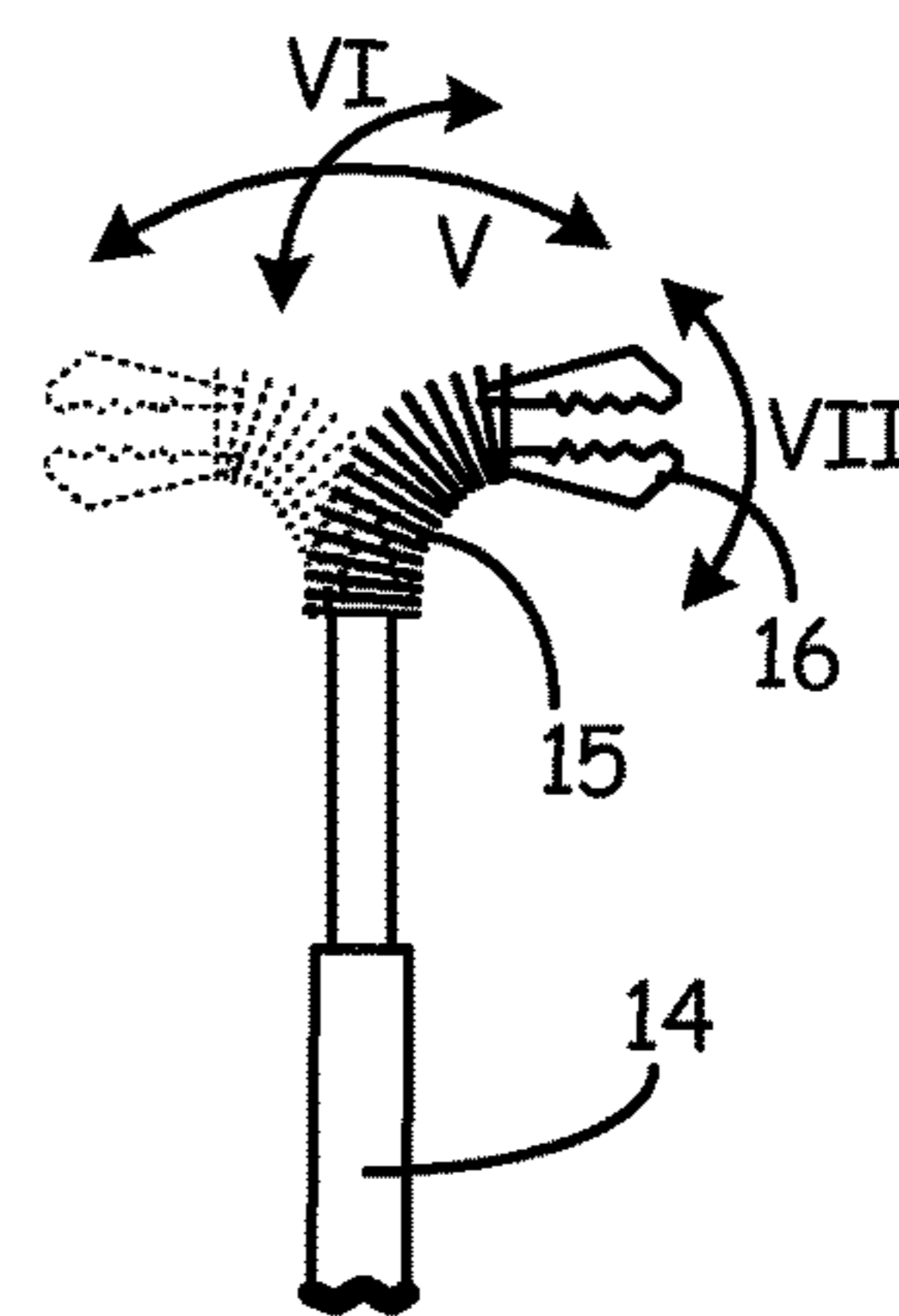


FIG. 7B

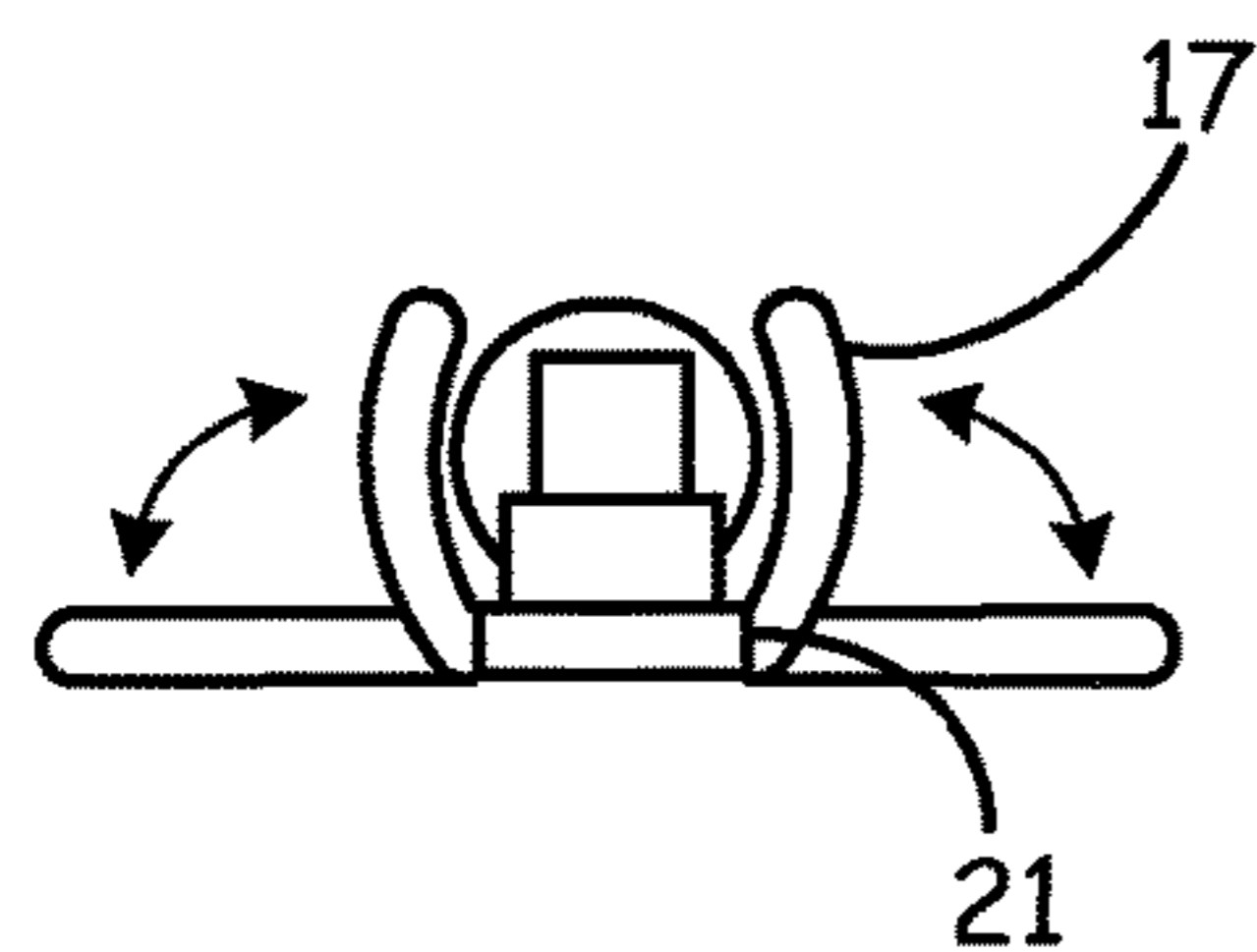


FIG. 8A

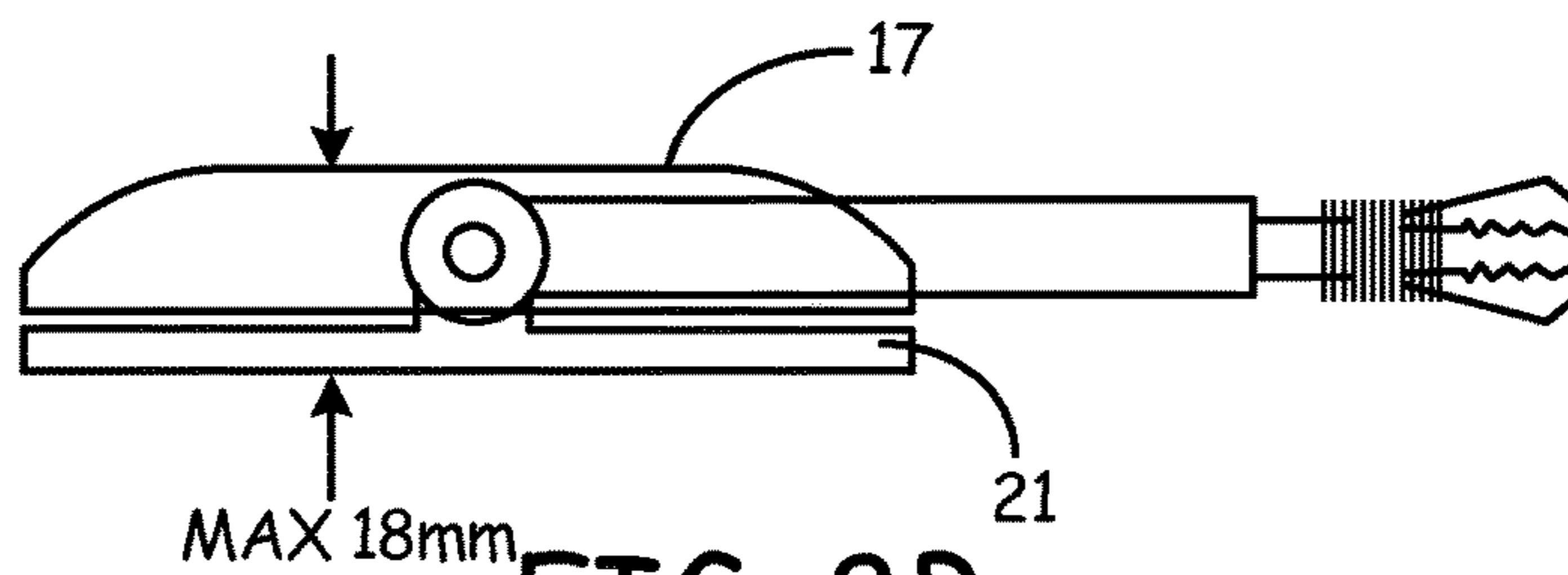


FIG. 8B

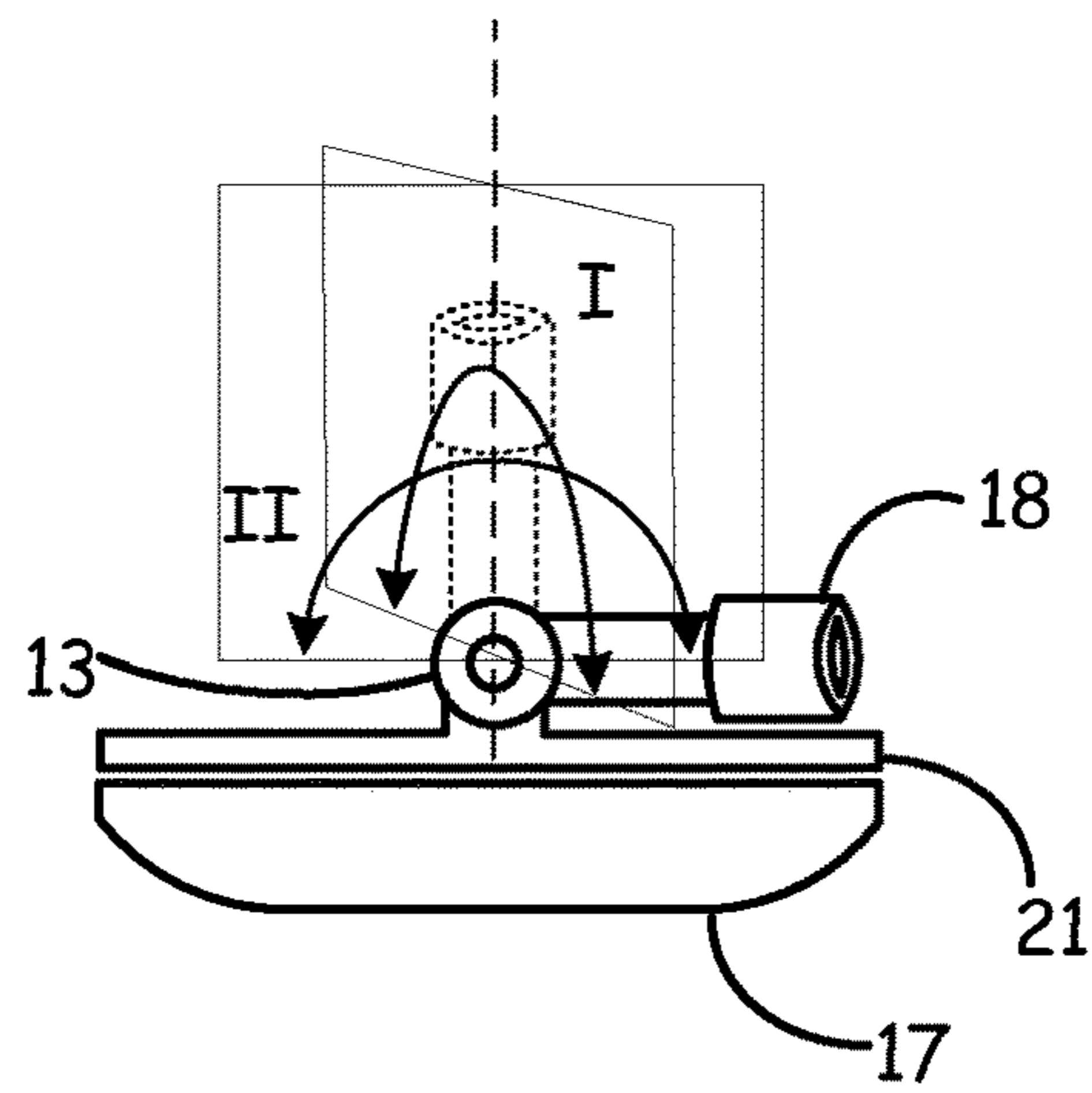


FIG. 9

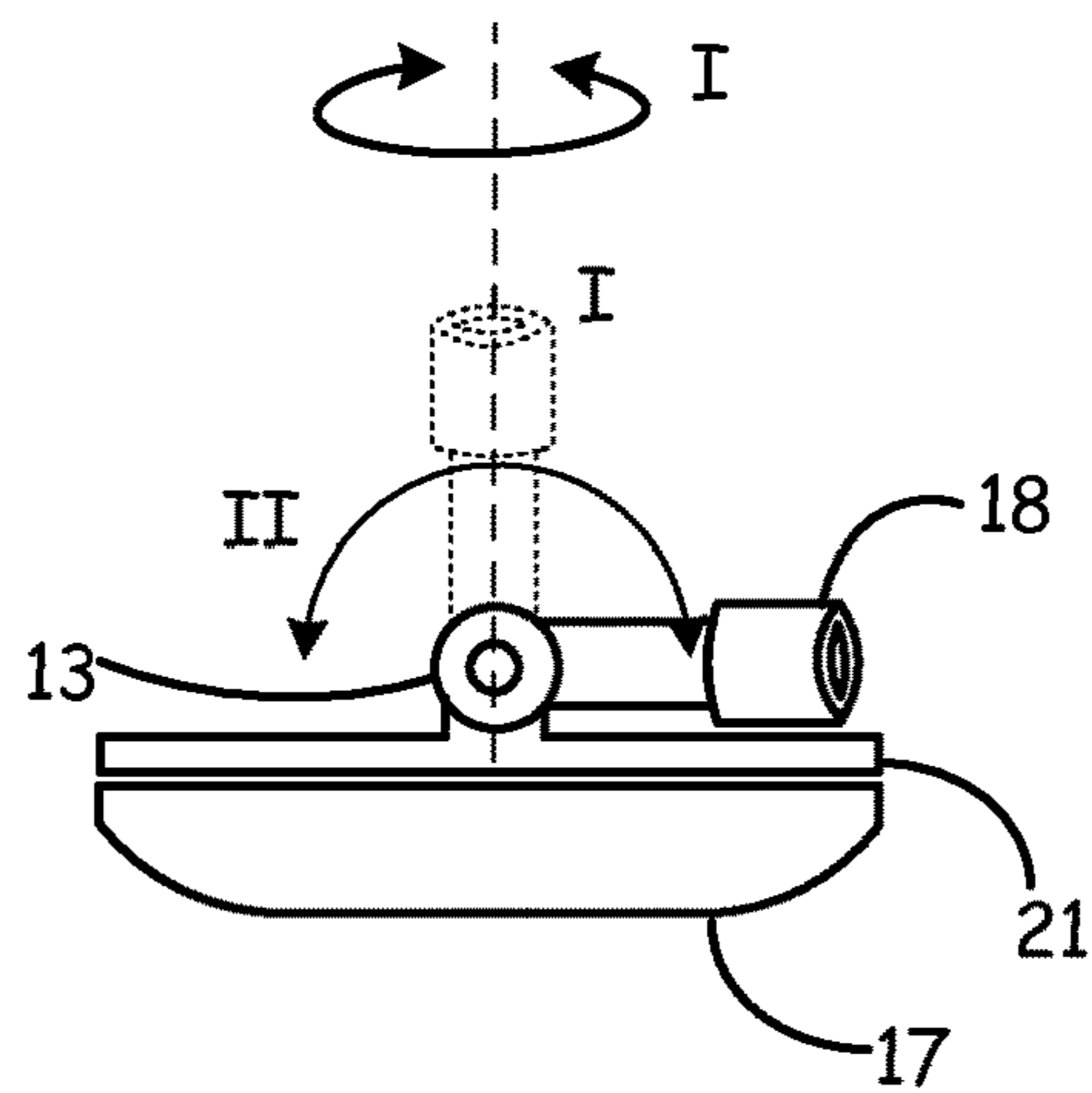


FIG. 10

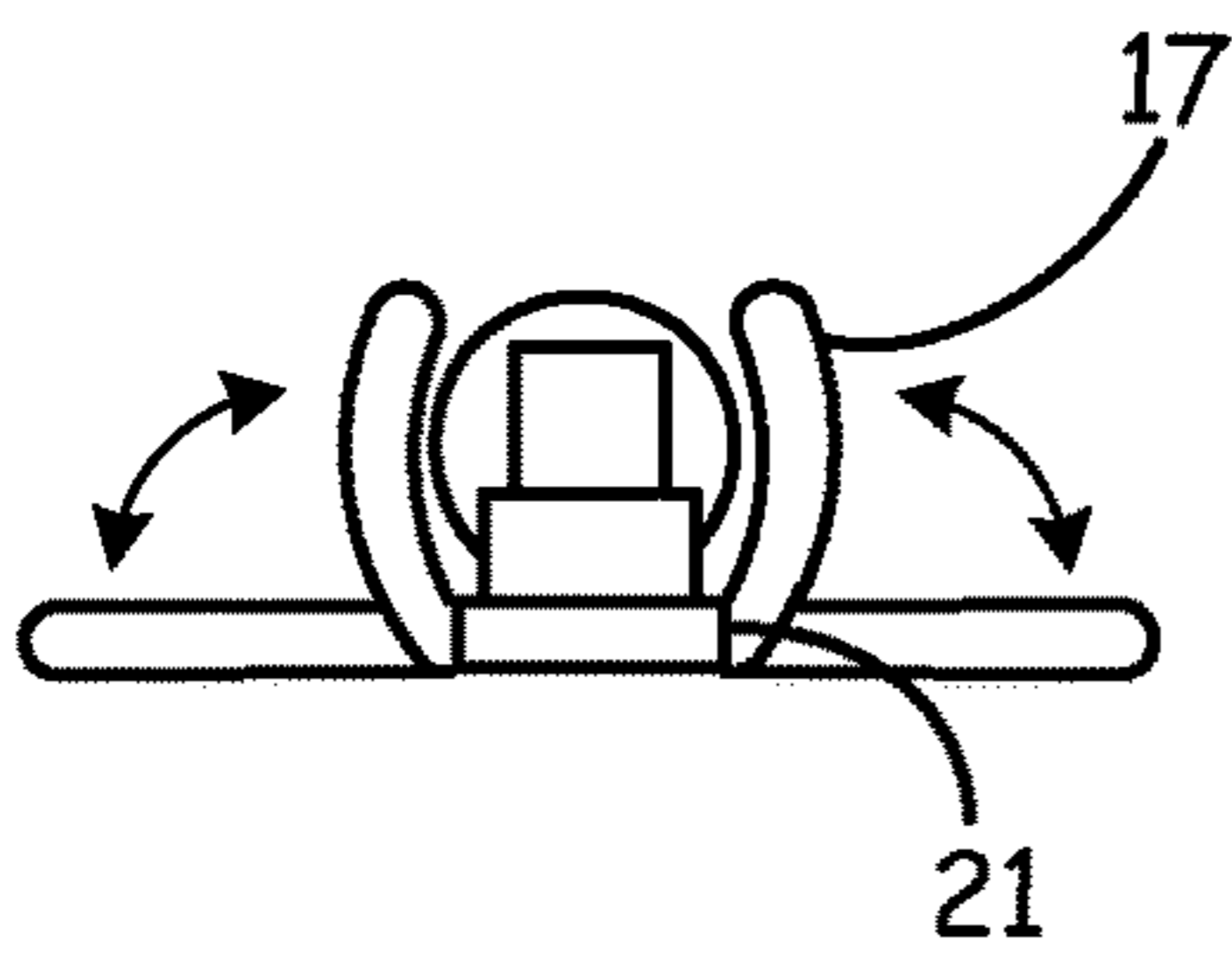


FIG. 11A

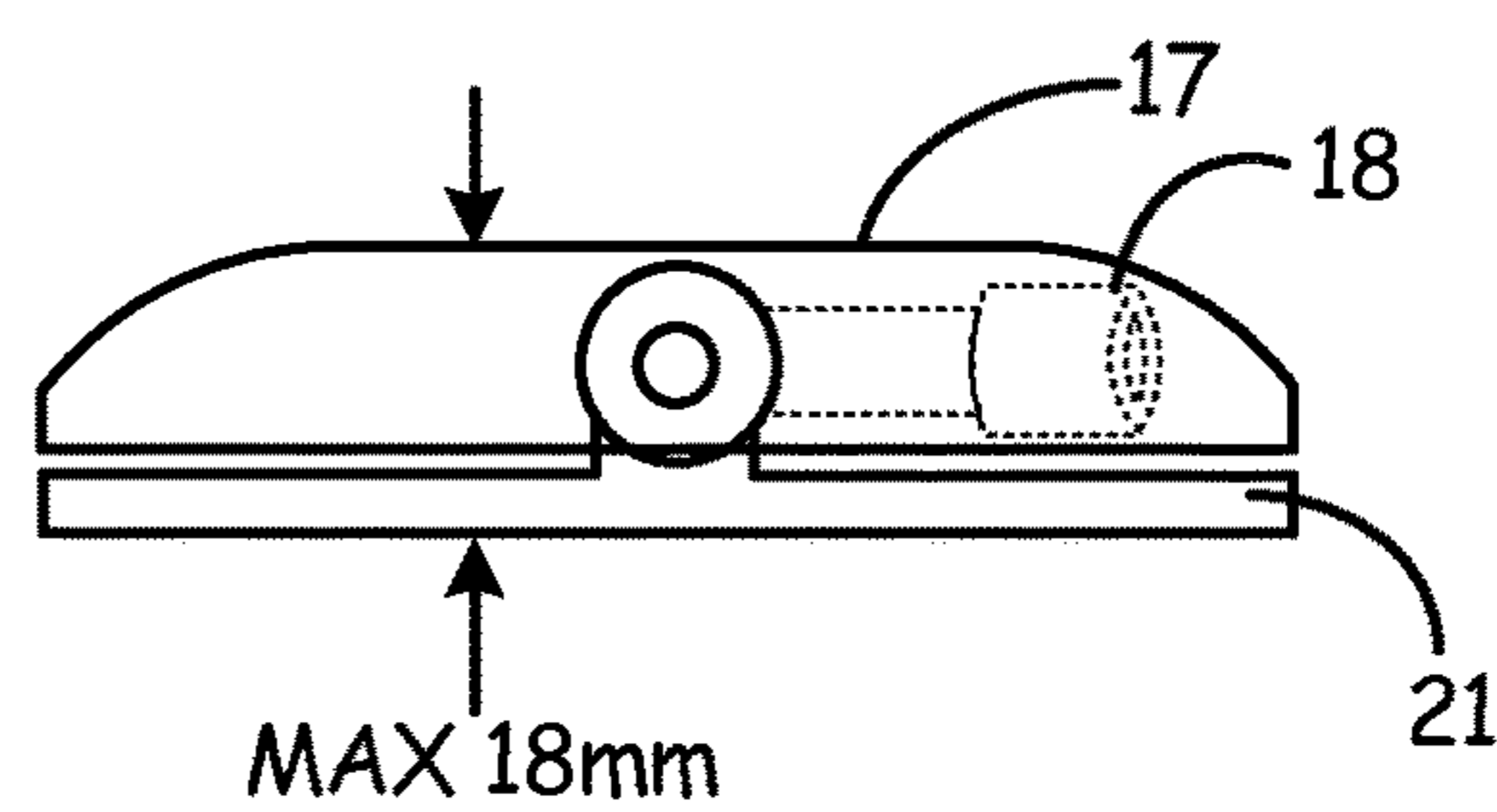


FIG. 11B

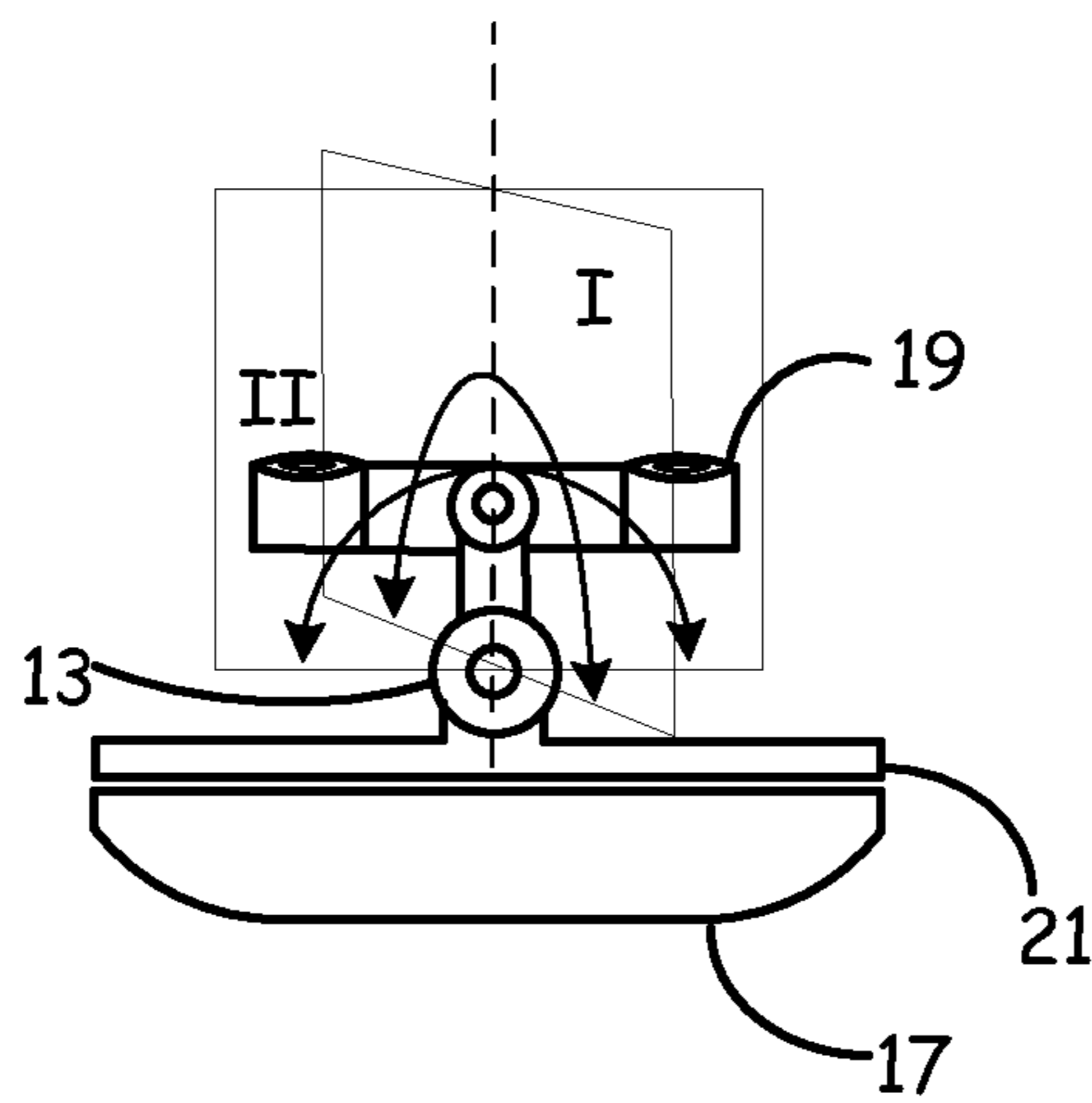


FIG. 12

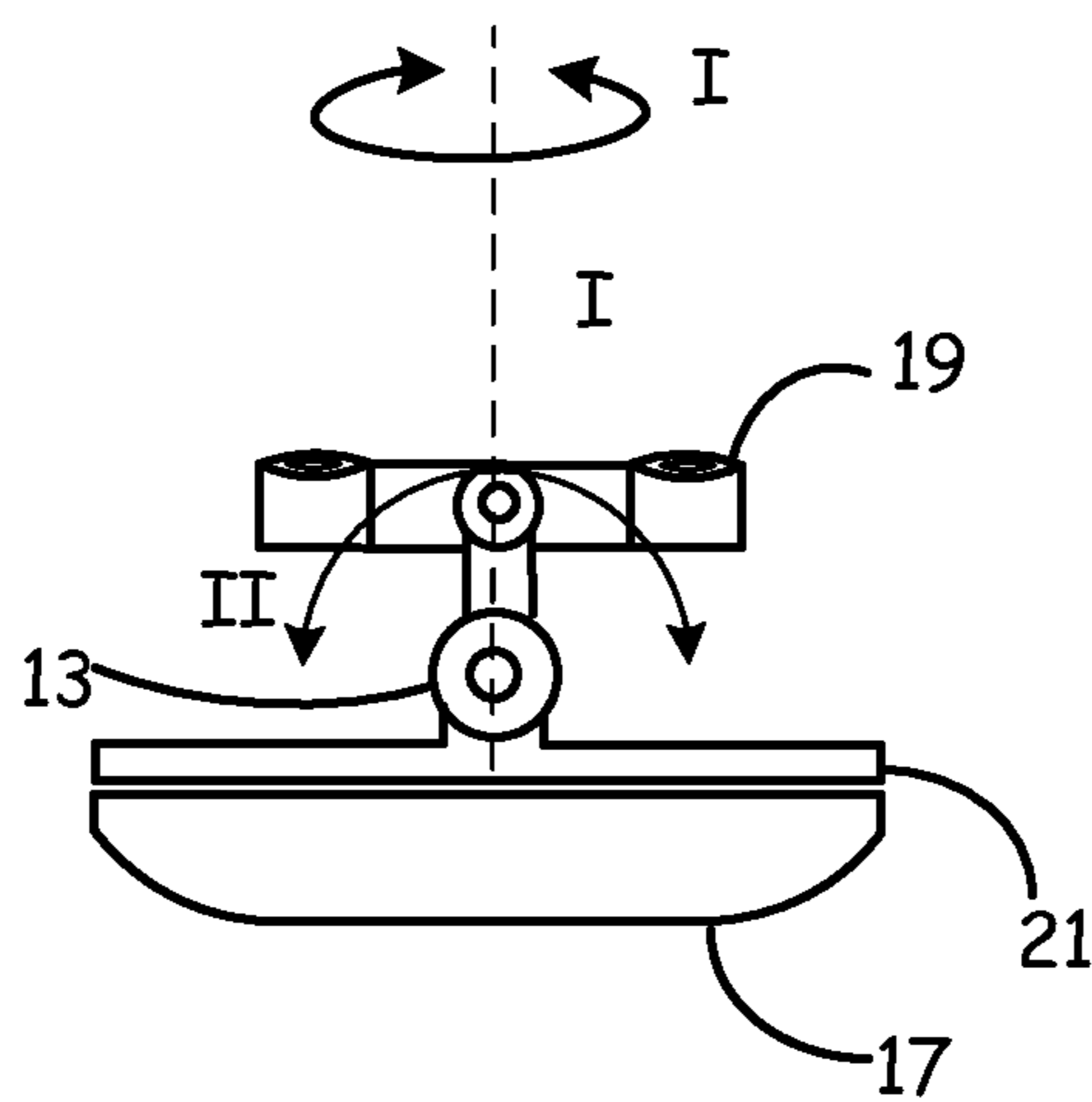


FIG. 13

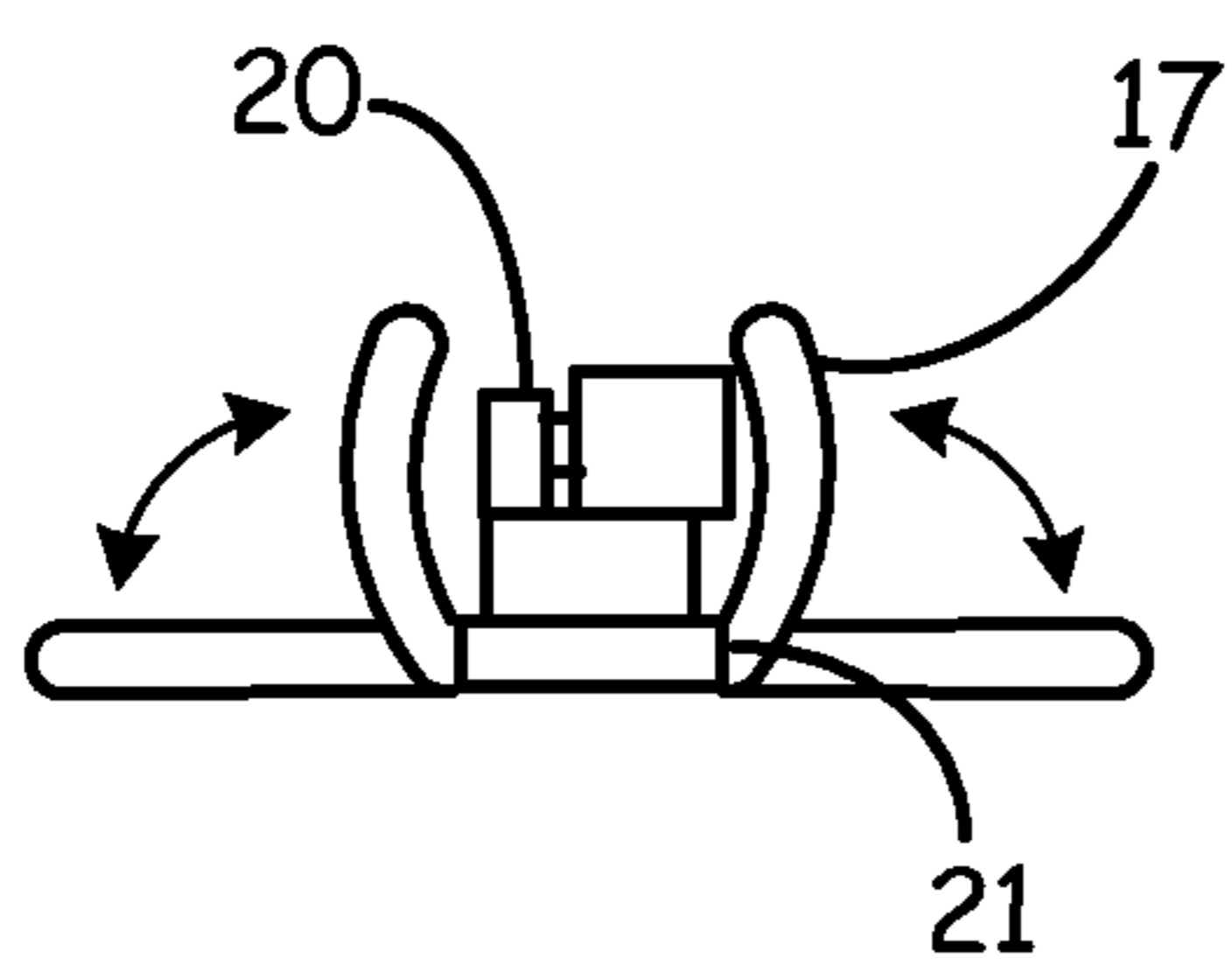


FIG. 14A

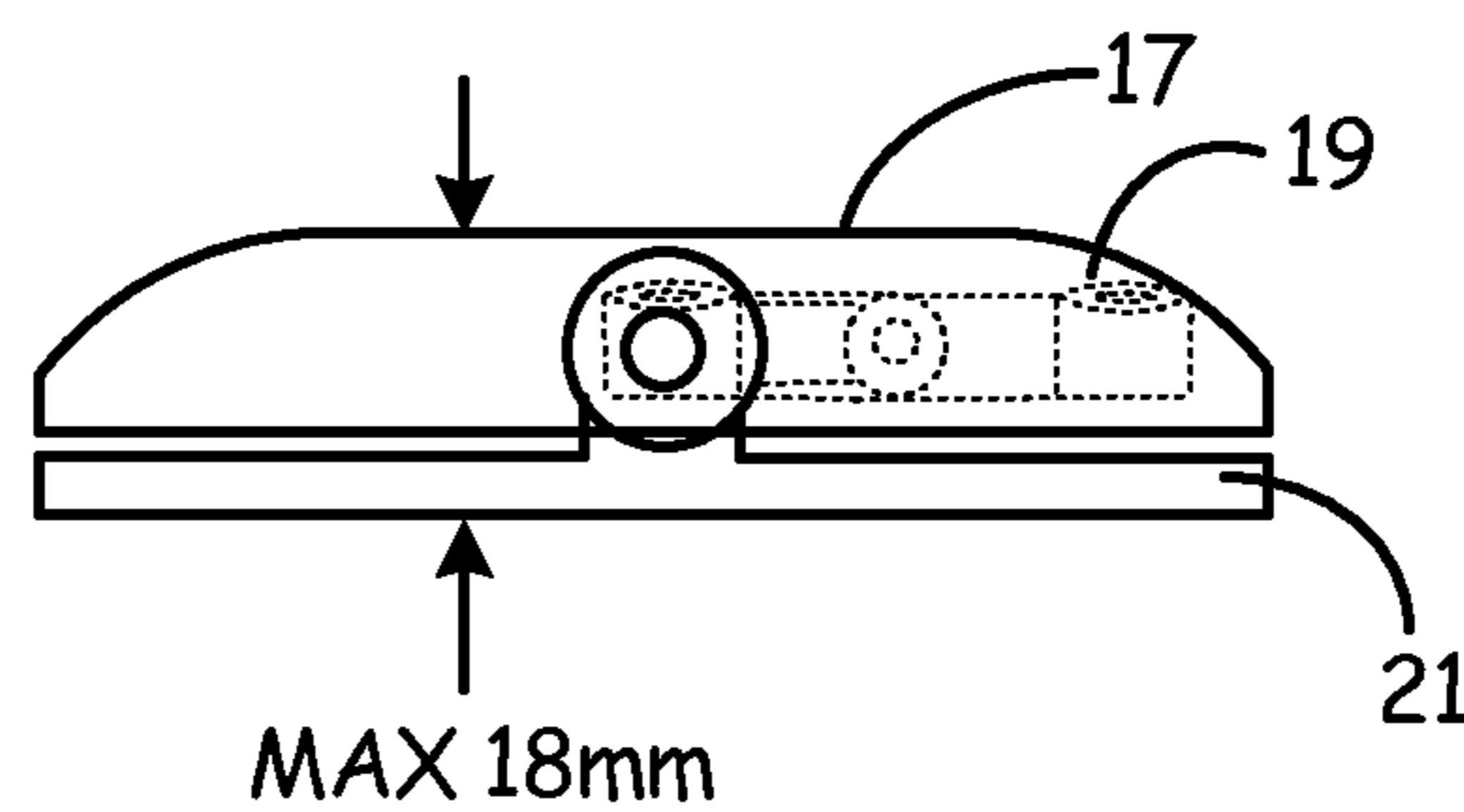


FIG. 14B

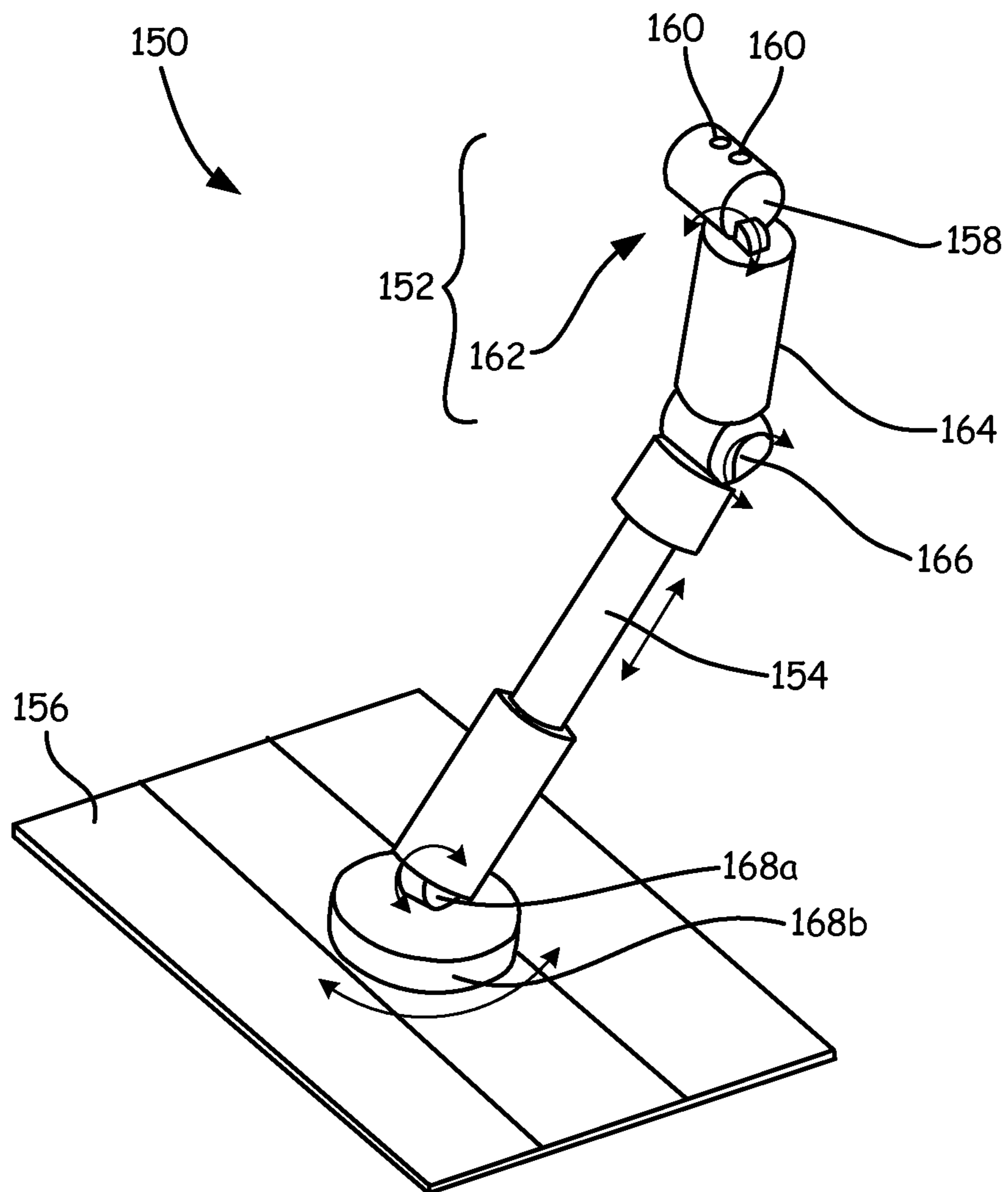
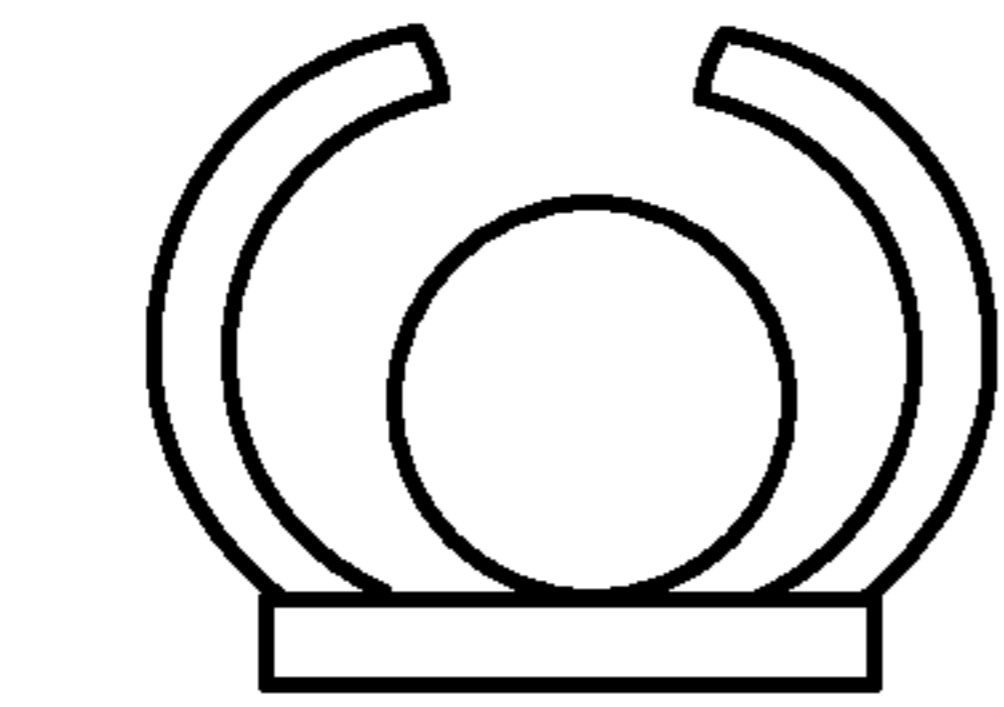
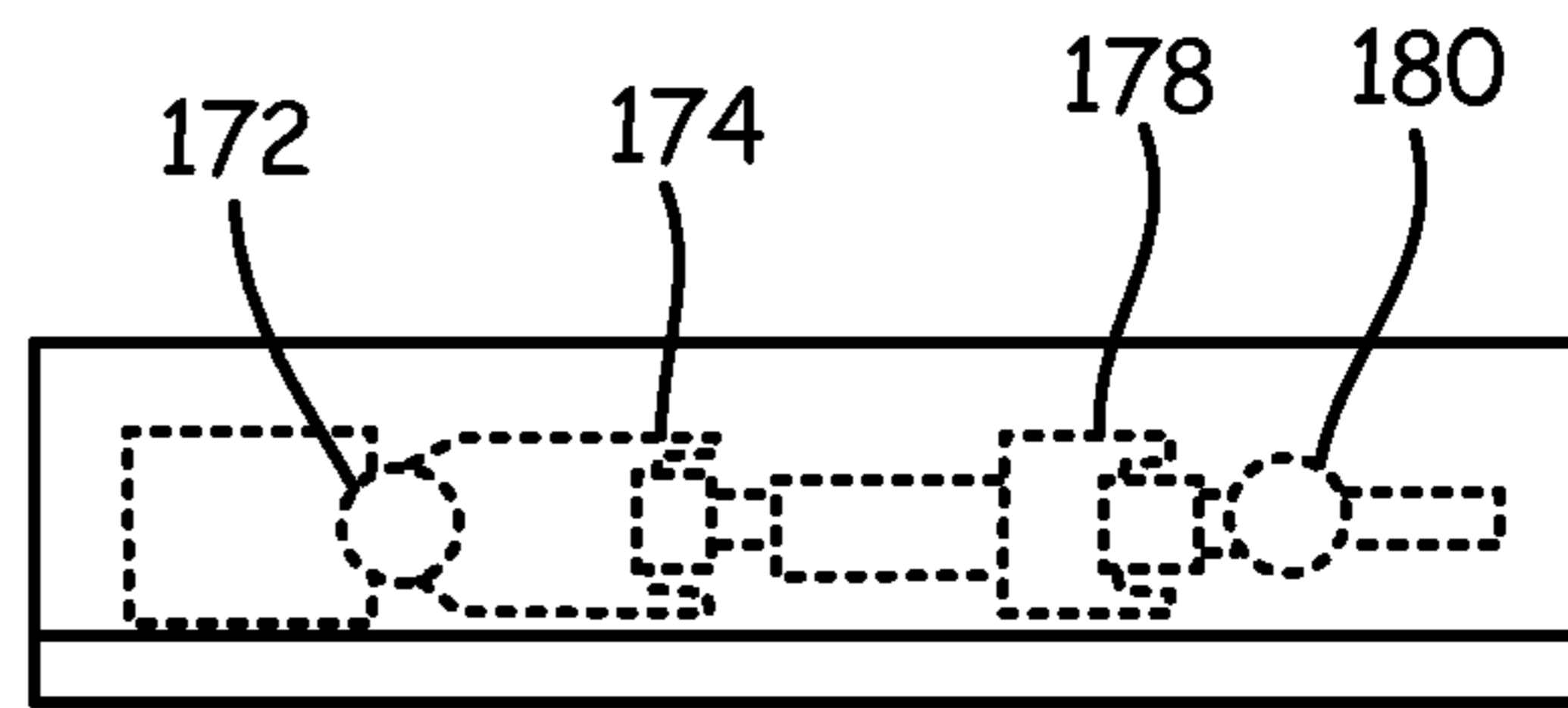


FIG. 15

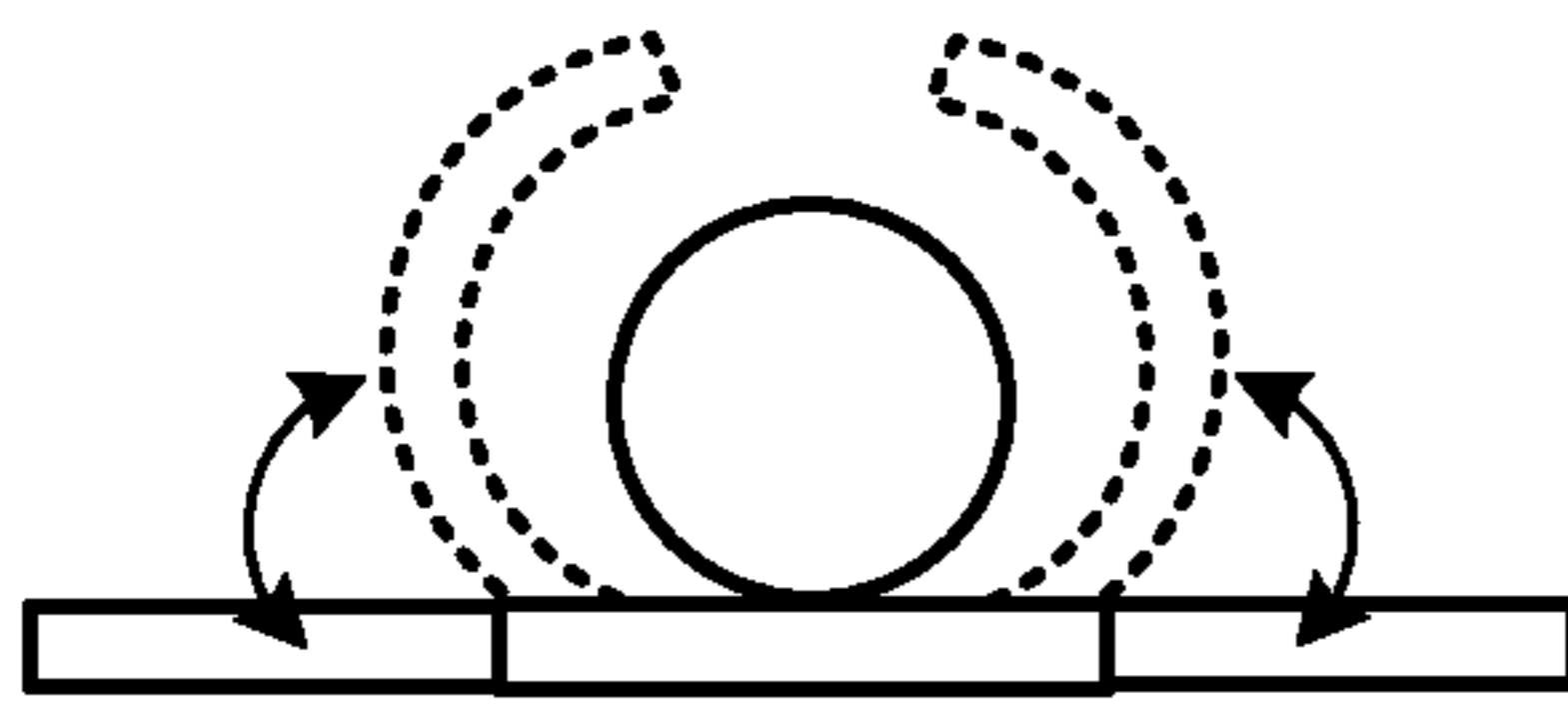




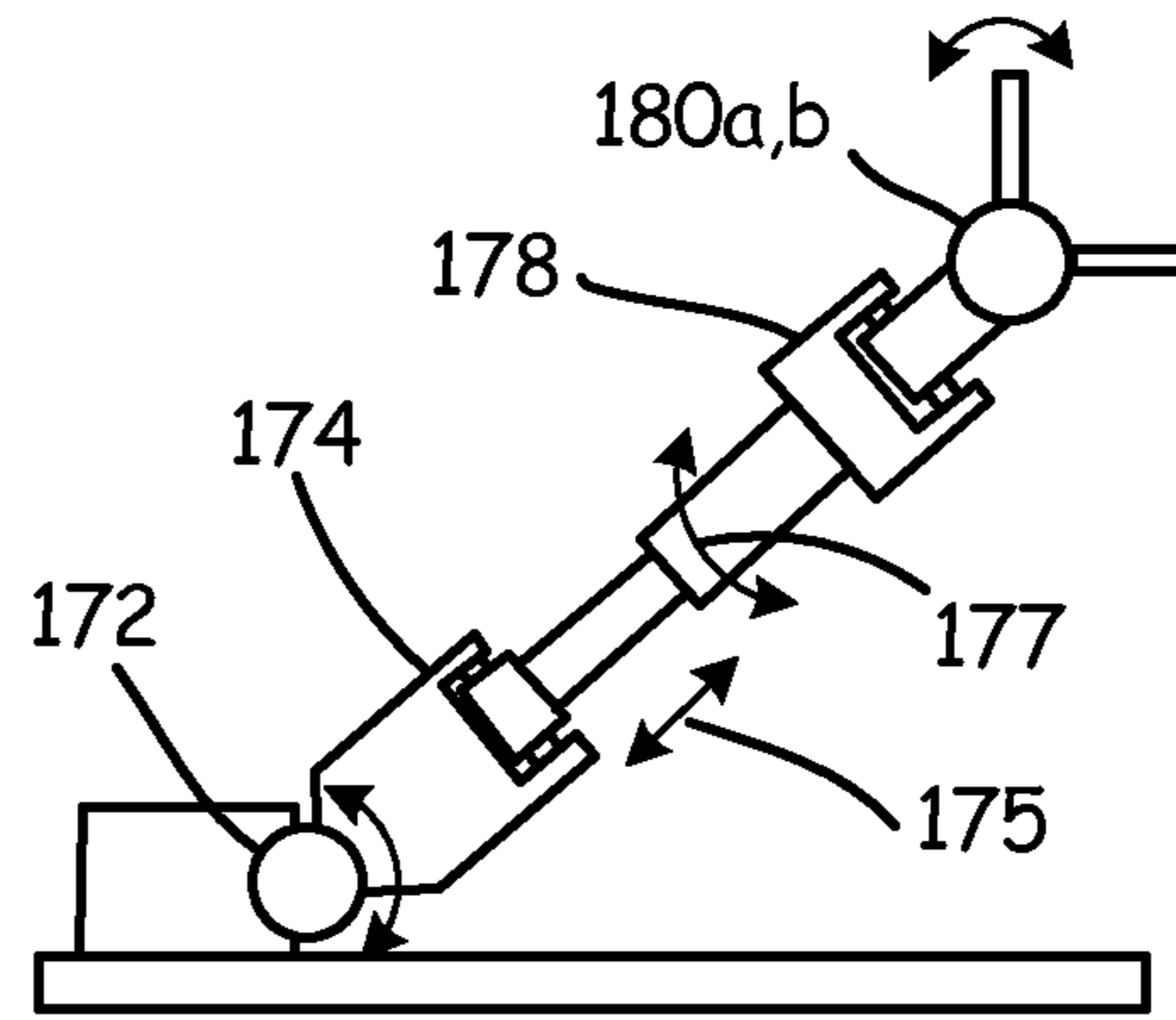
170  
FIG. 16A



170  
FIG. 16B



170  
FIG. 16C



170  
FIG. 16D

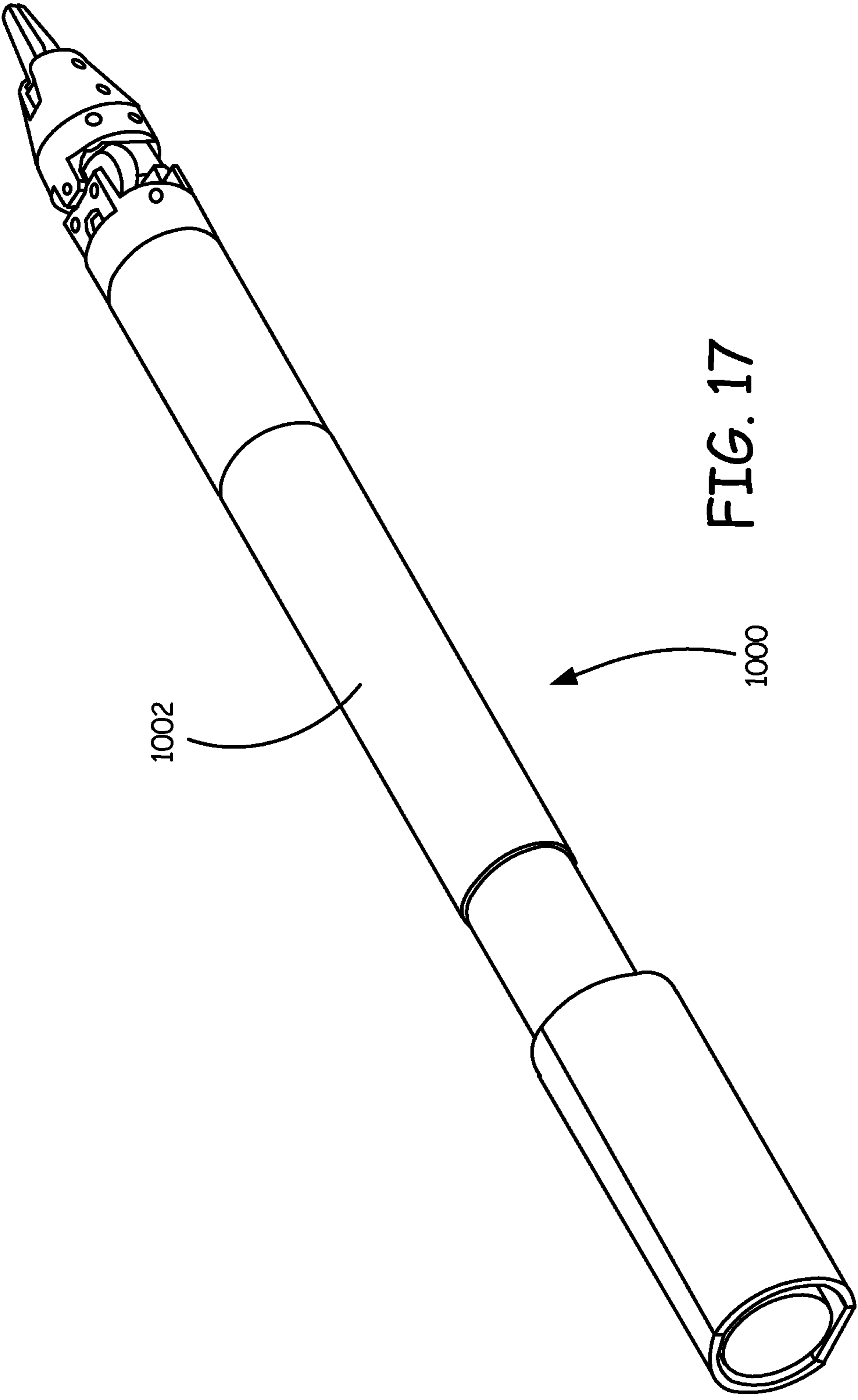


FIG. 17

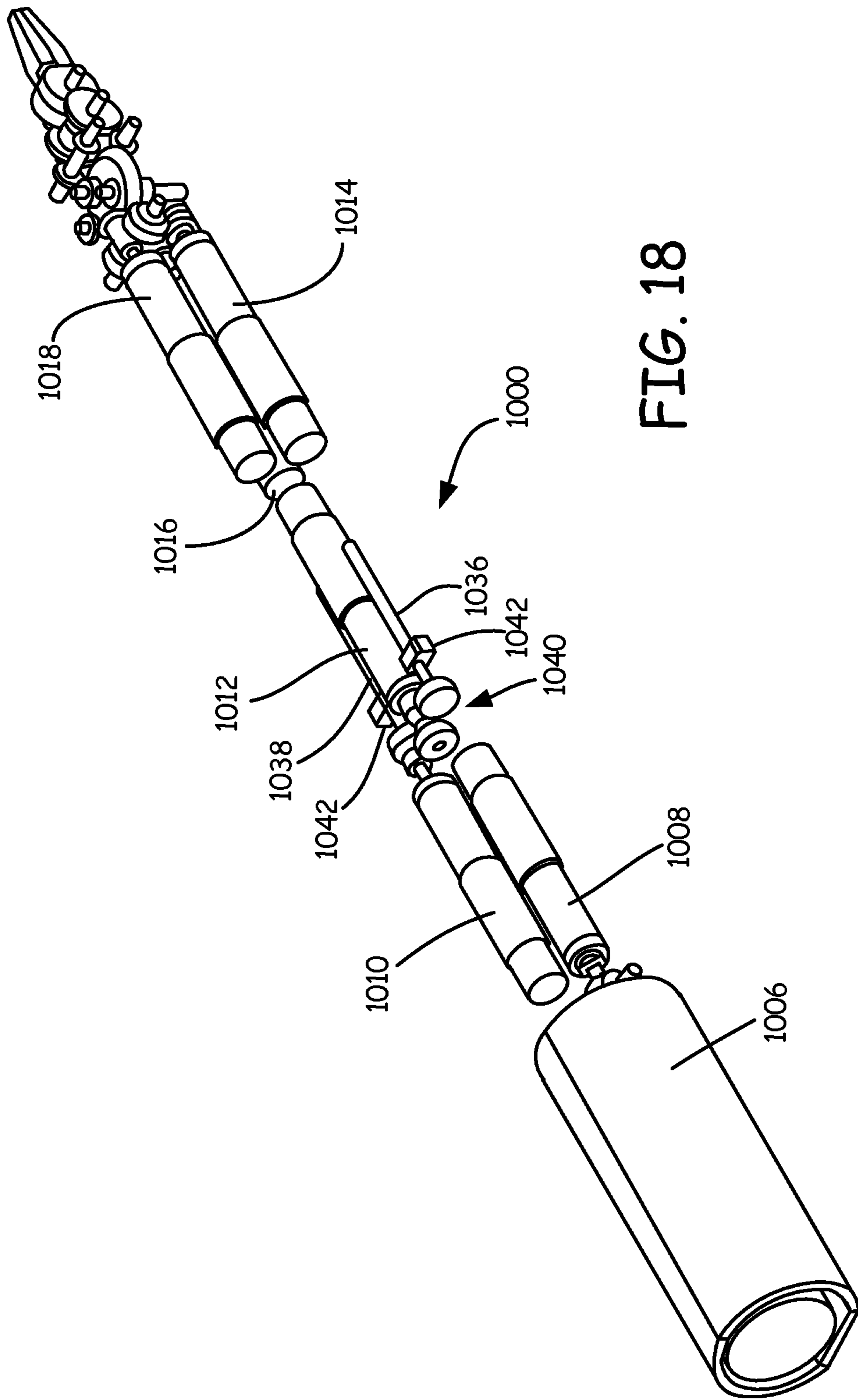


FIG. 18

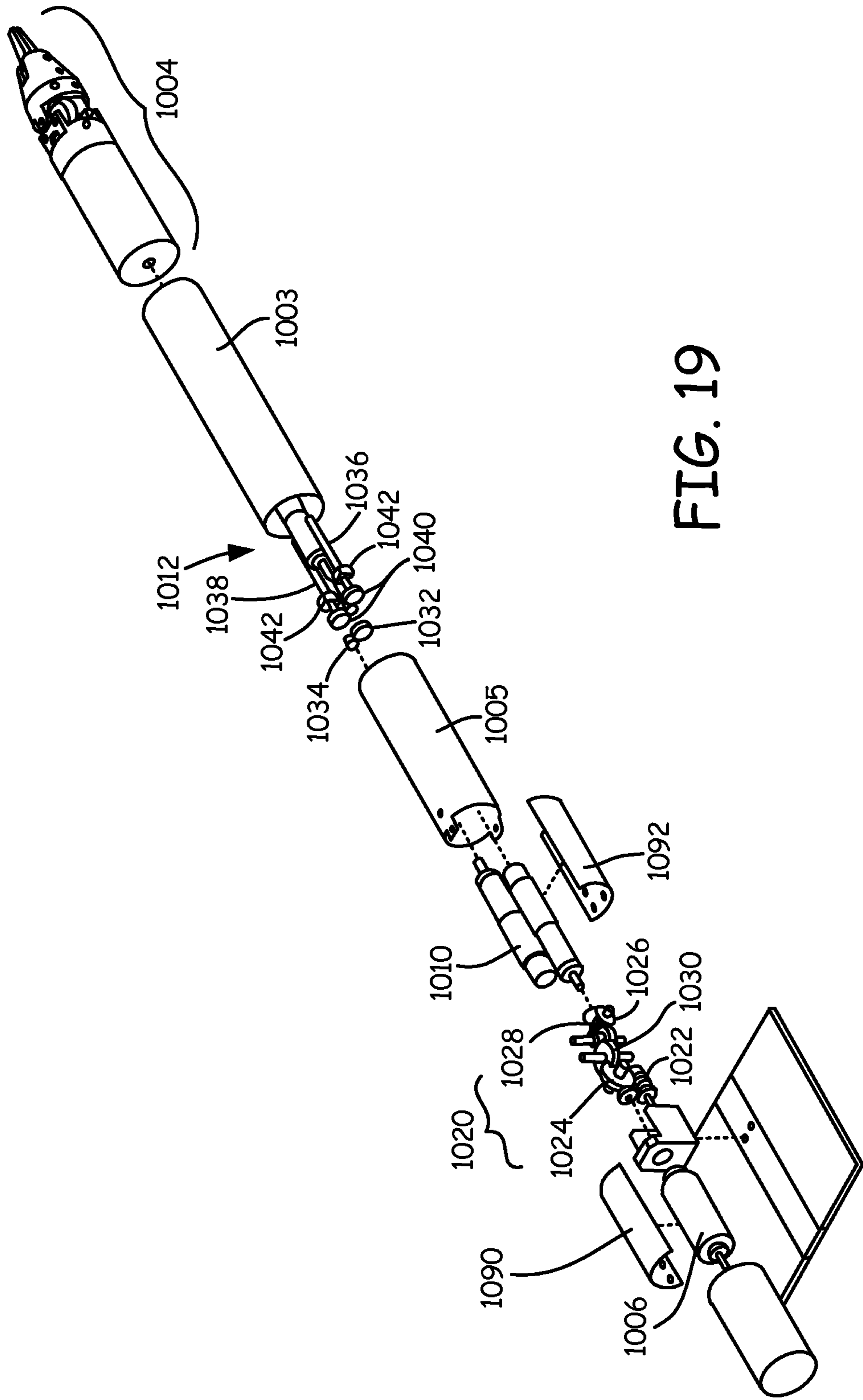


FIG. 19

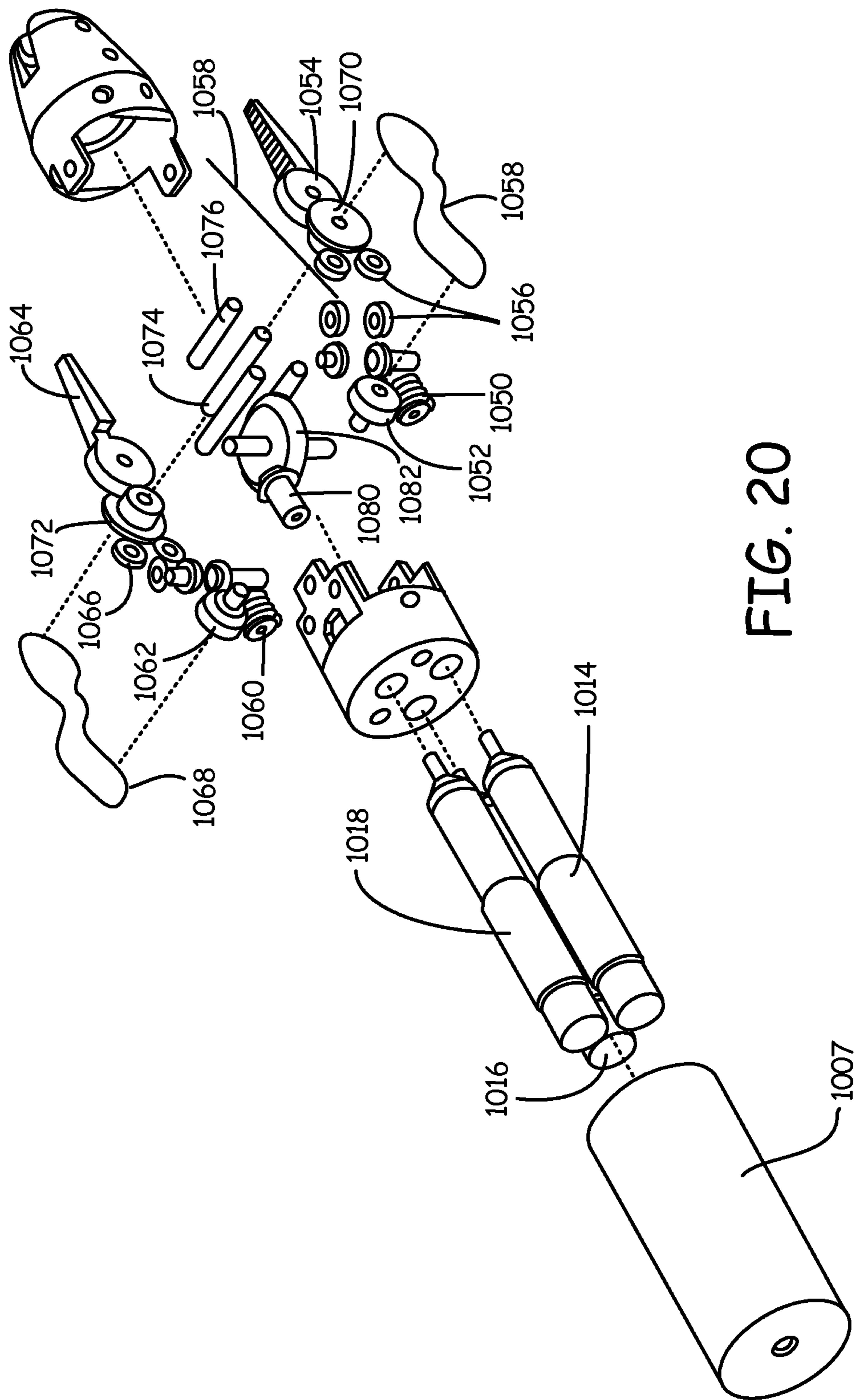


FIG. 20

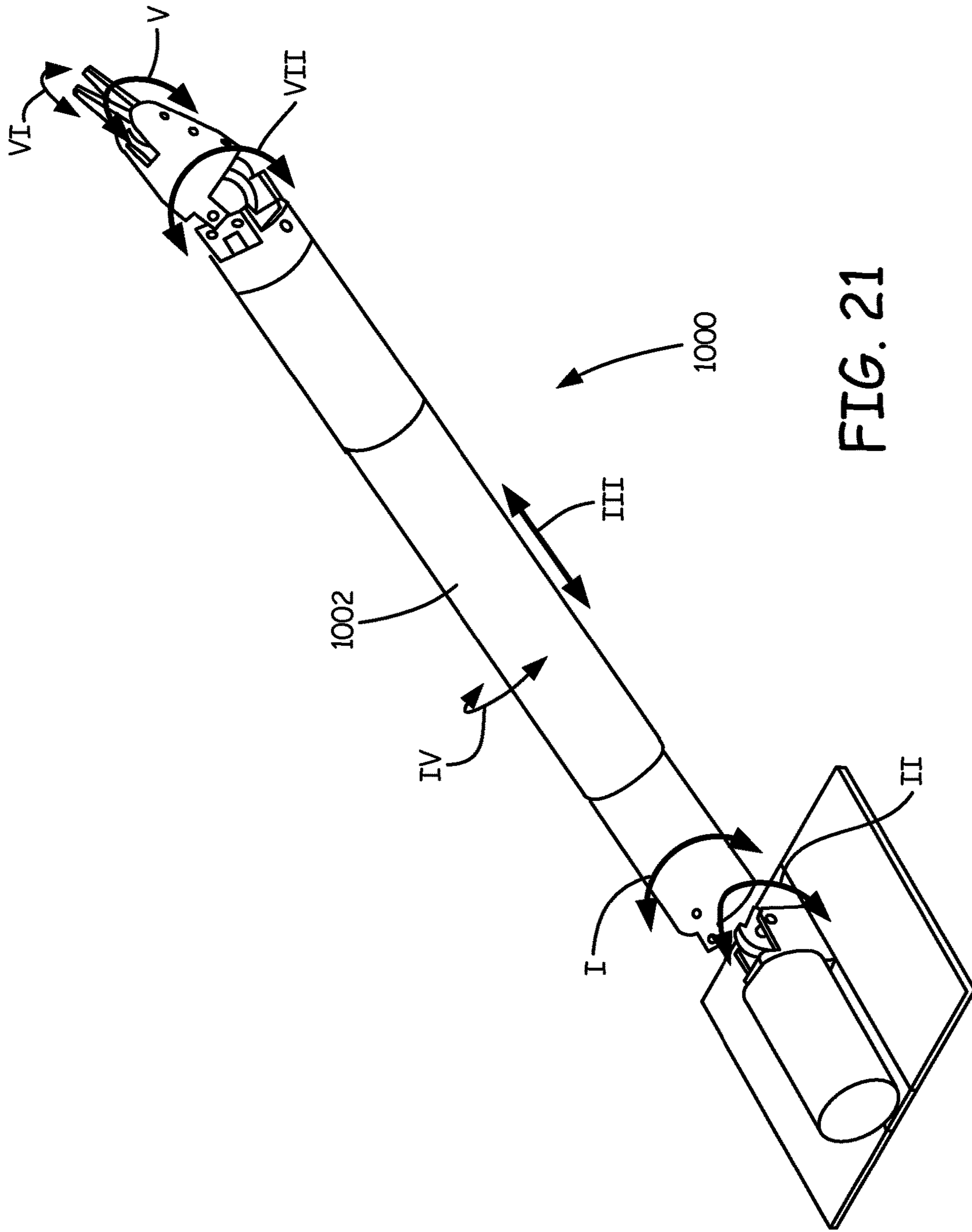


FIG. 21

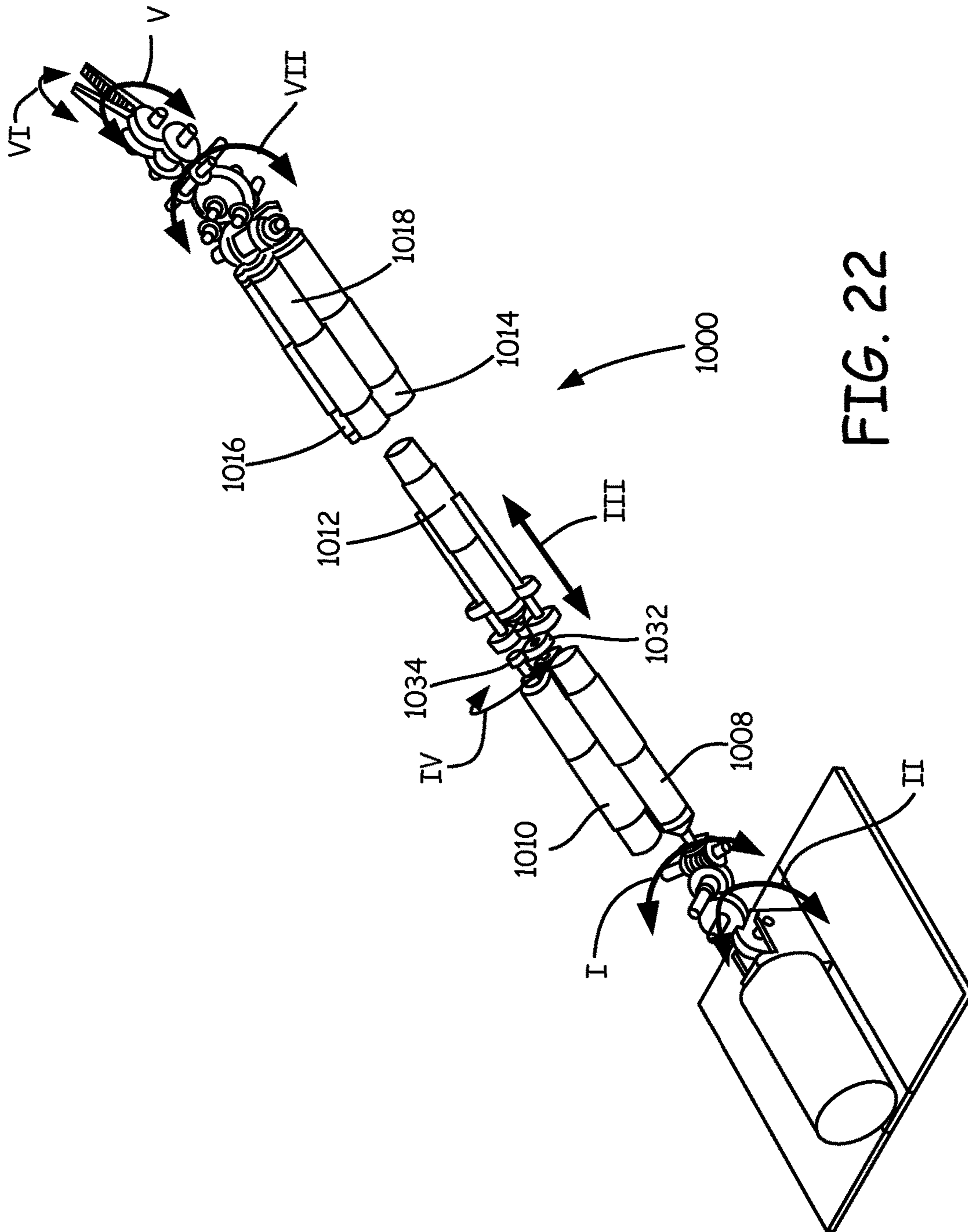


FIG. 22

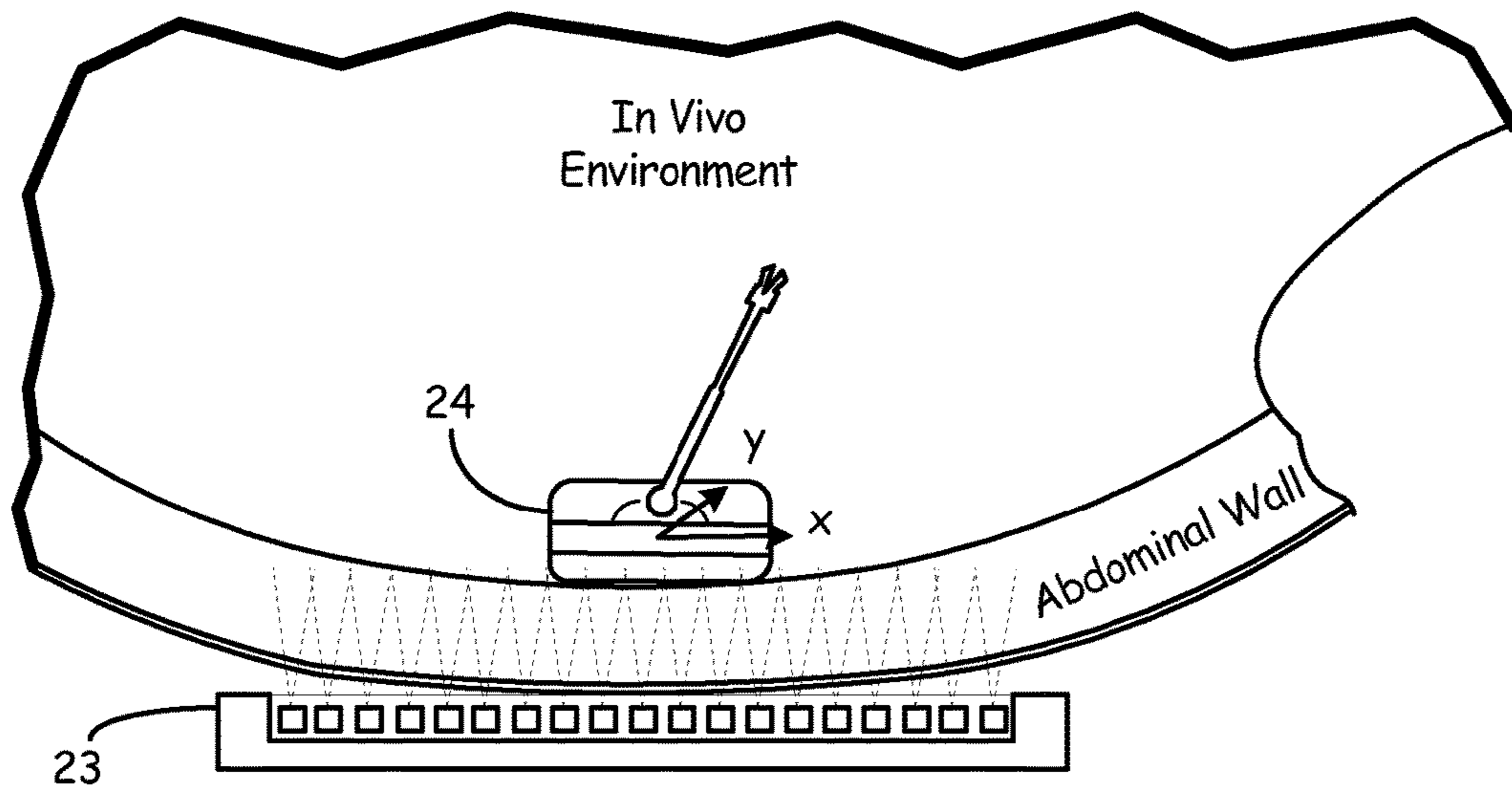


FIG. 23

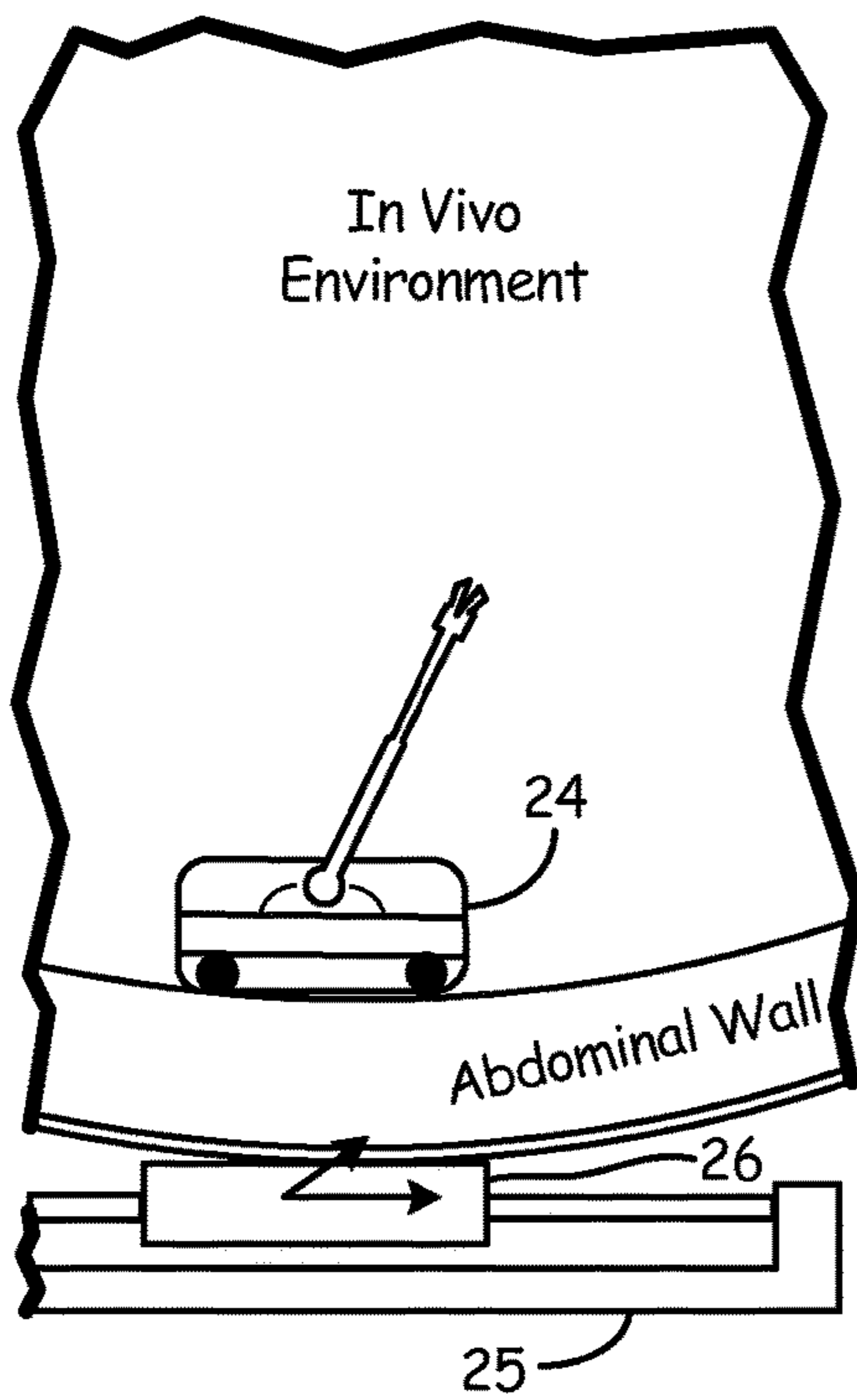


FIG. 24A

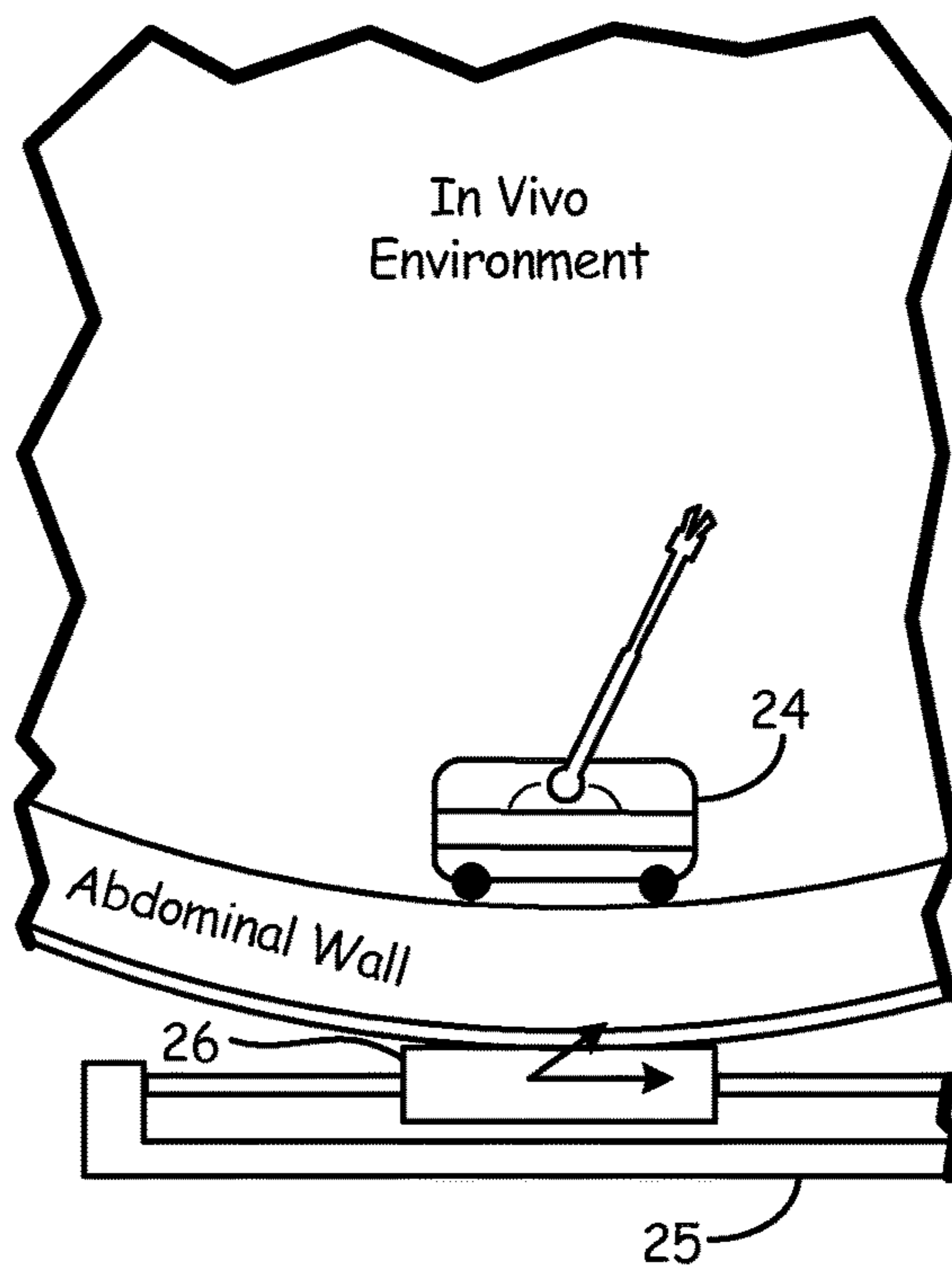


FIG. 24B



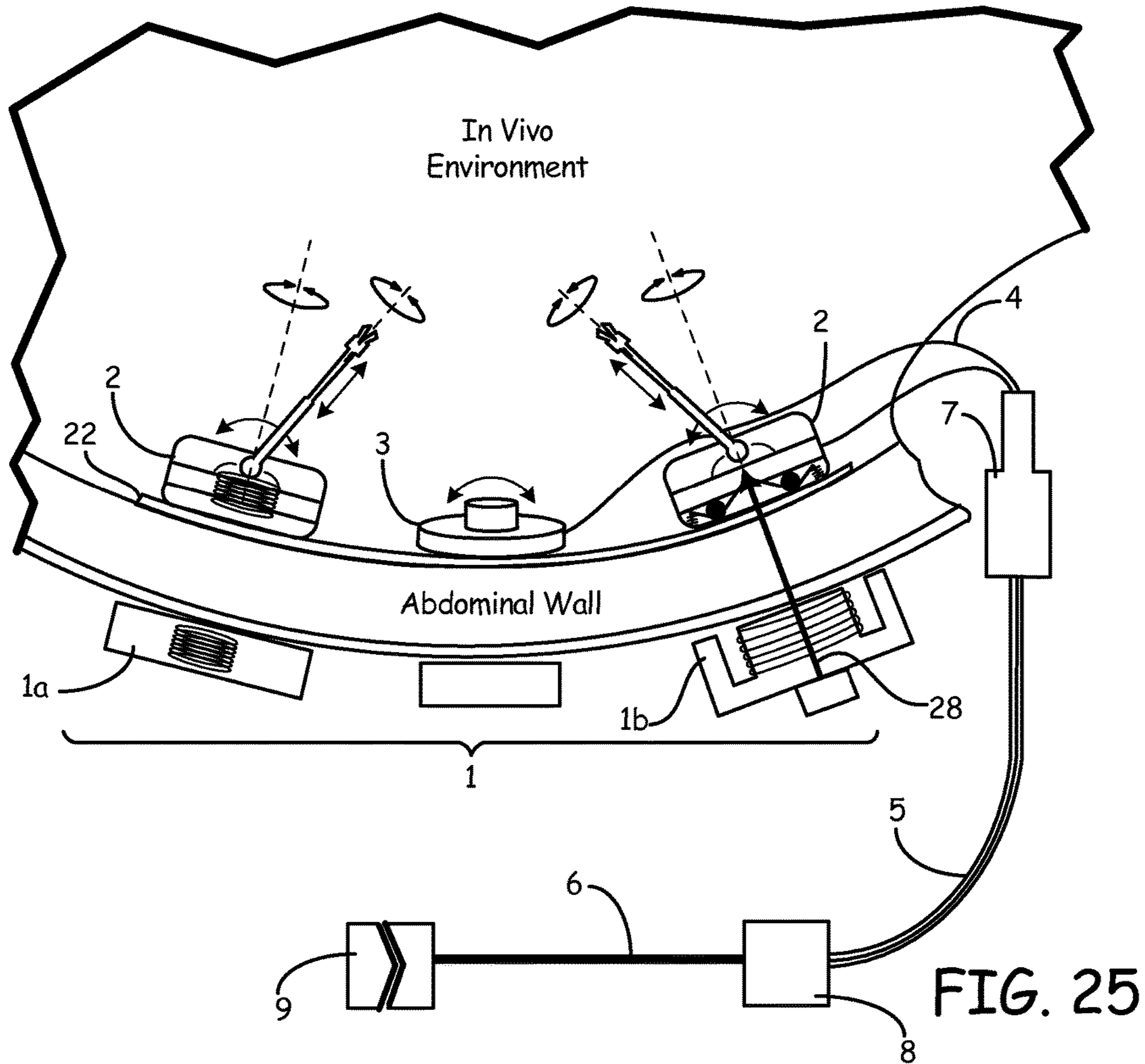


FIG. 25

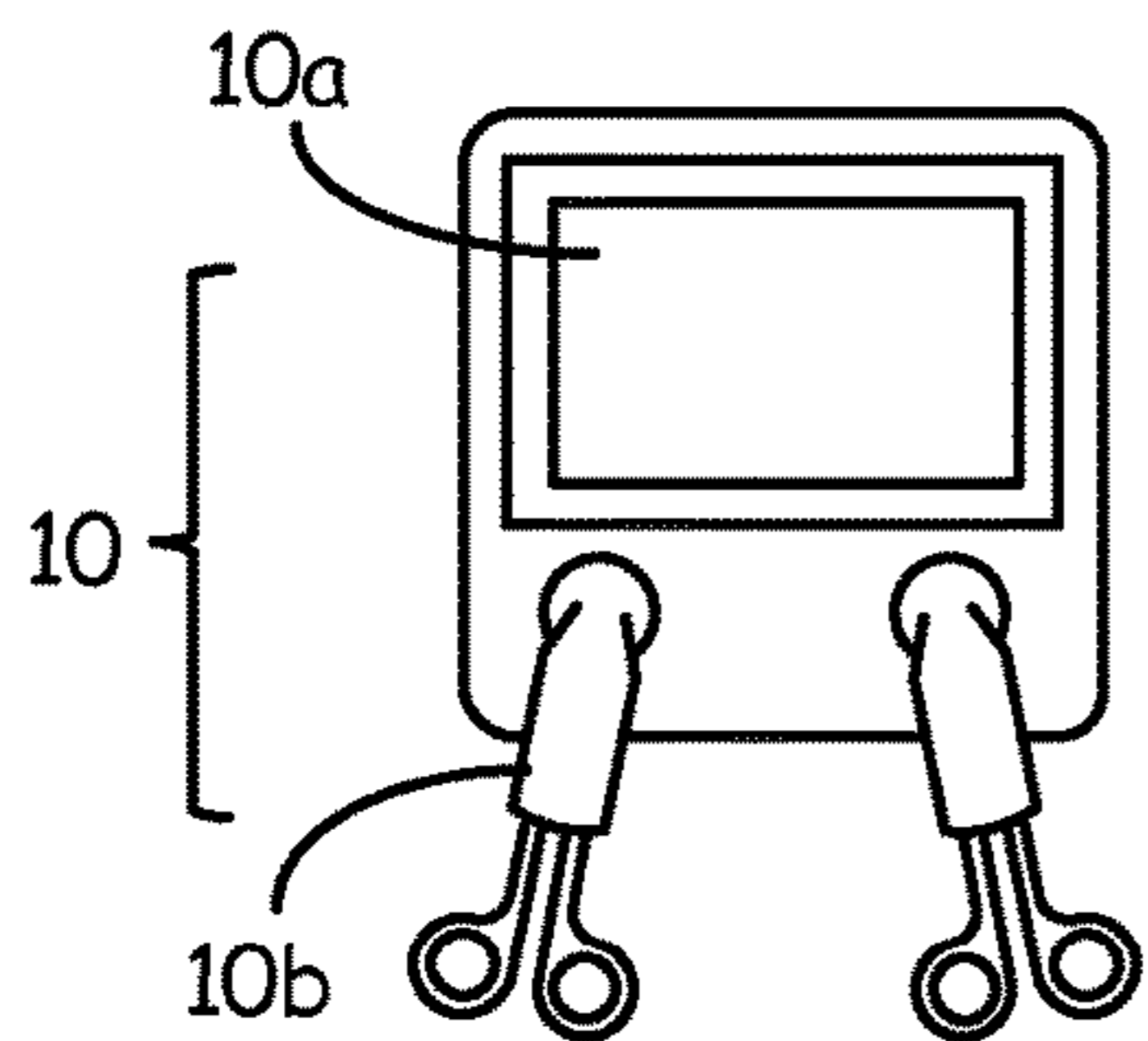


FIG. 26A

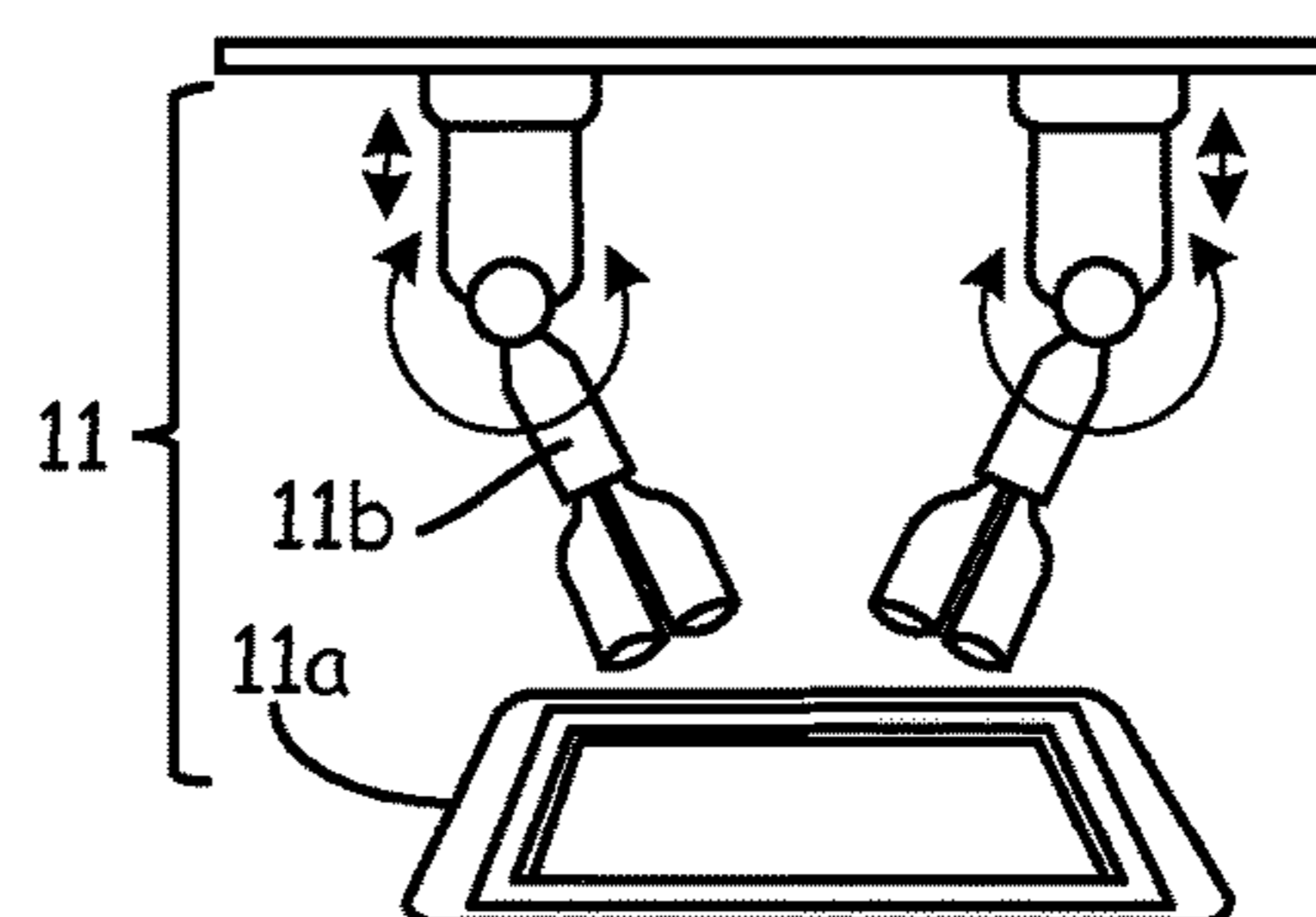


FIG. 26B

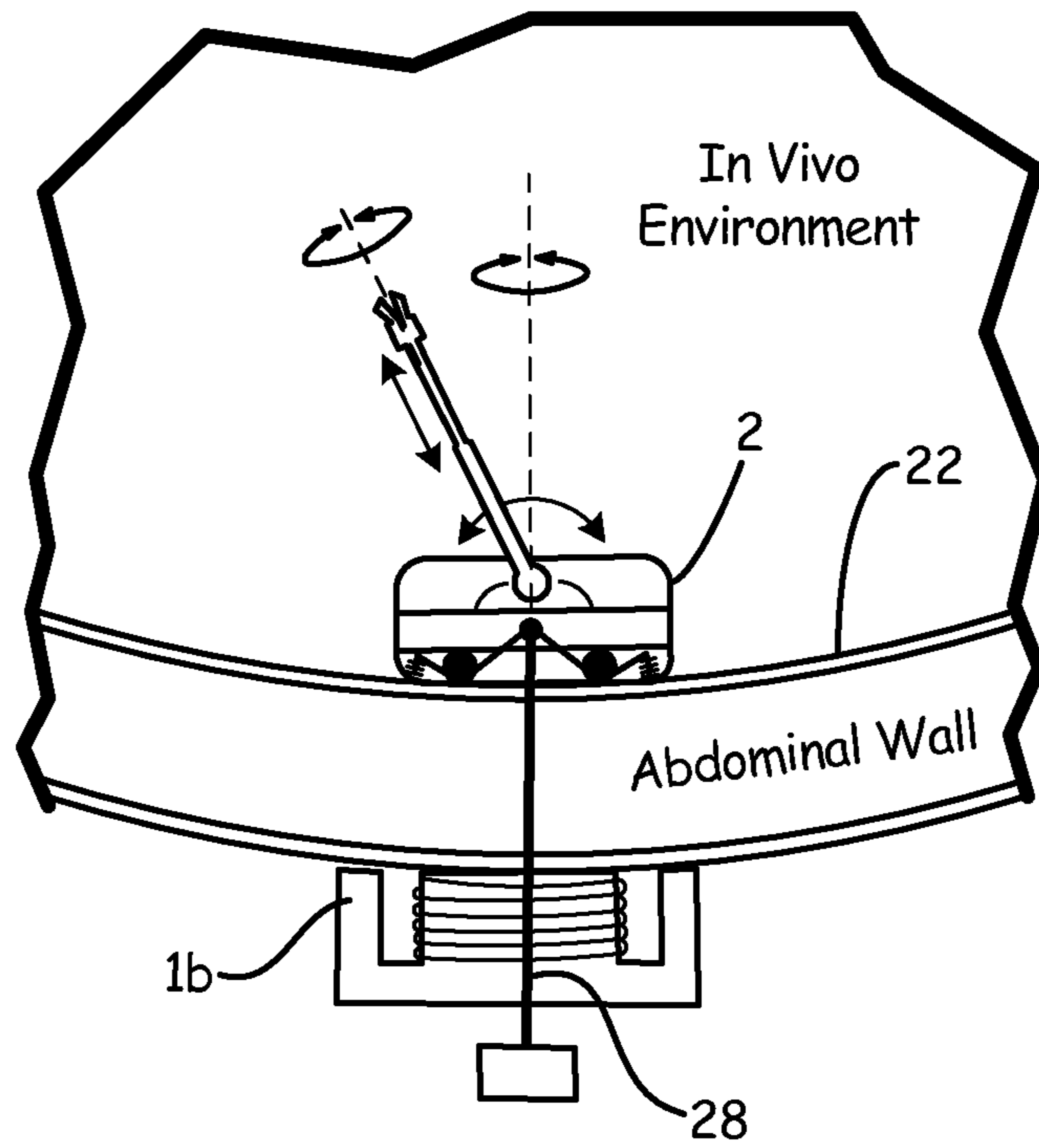


FIG. 27

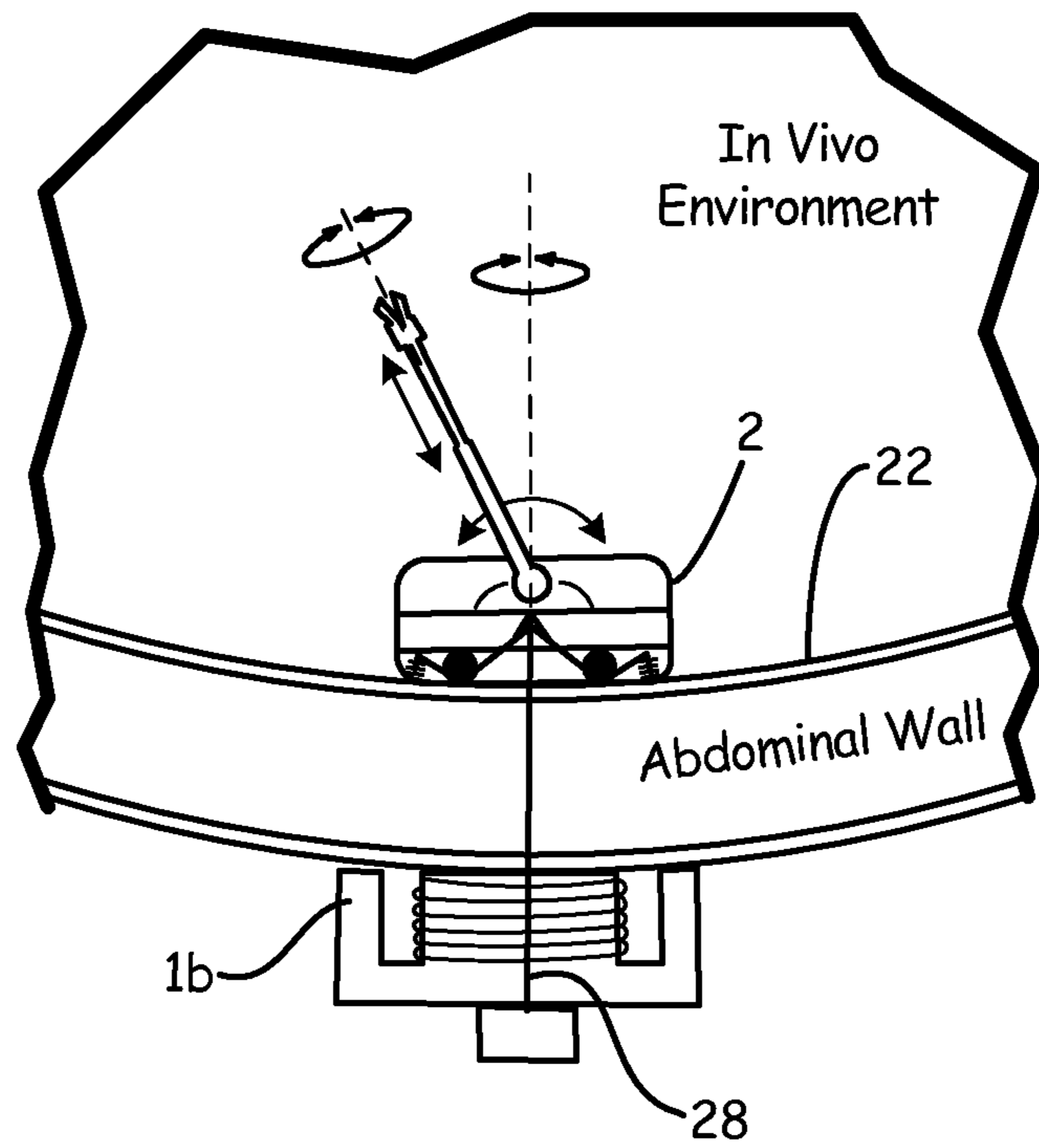


FIG. 28

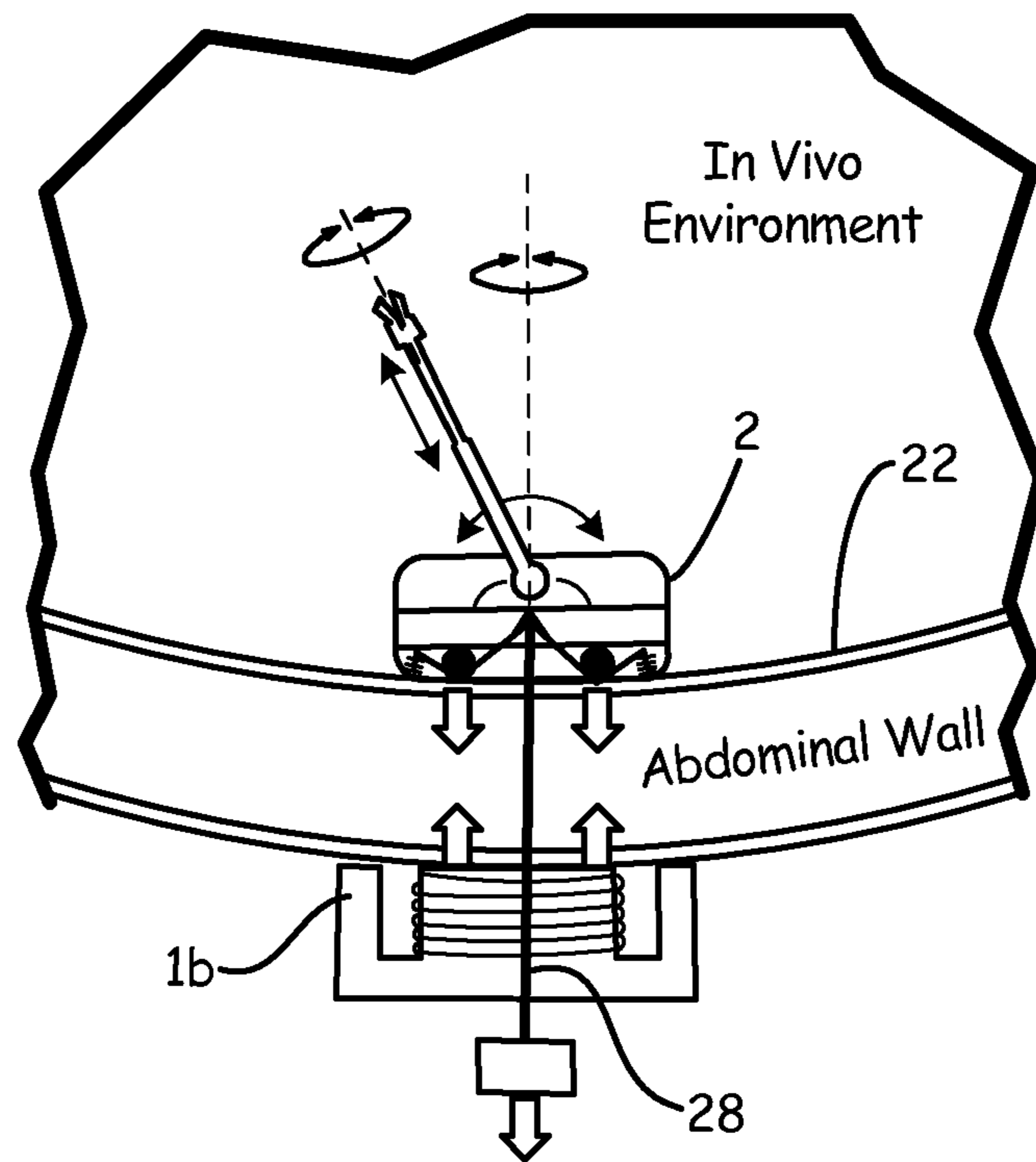


FIG. 29

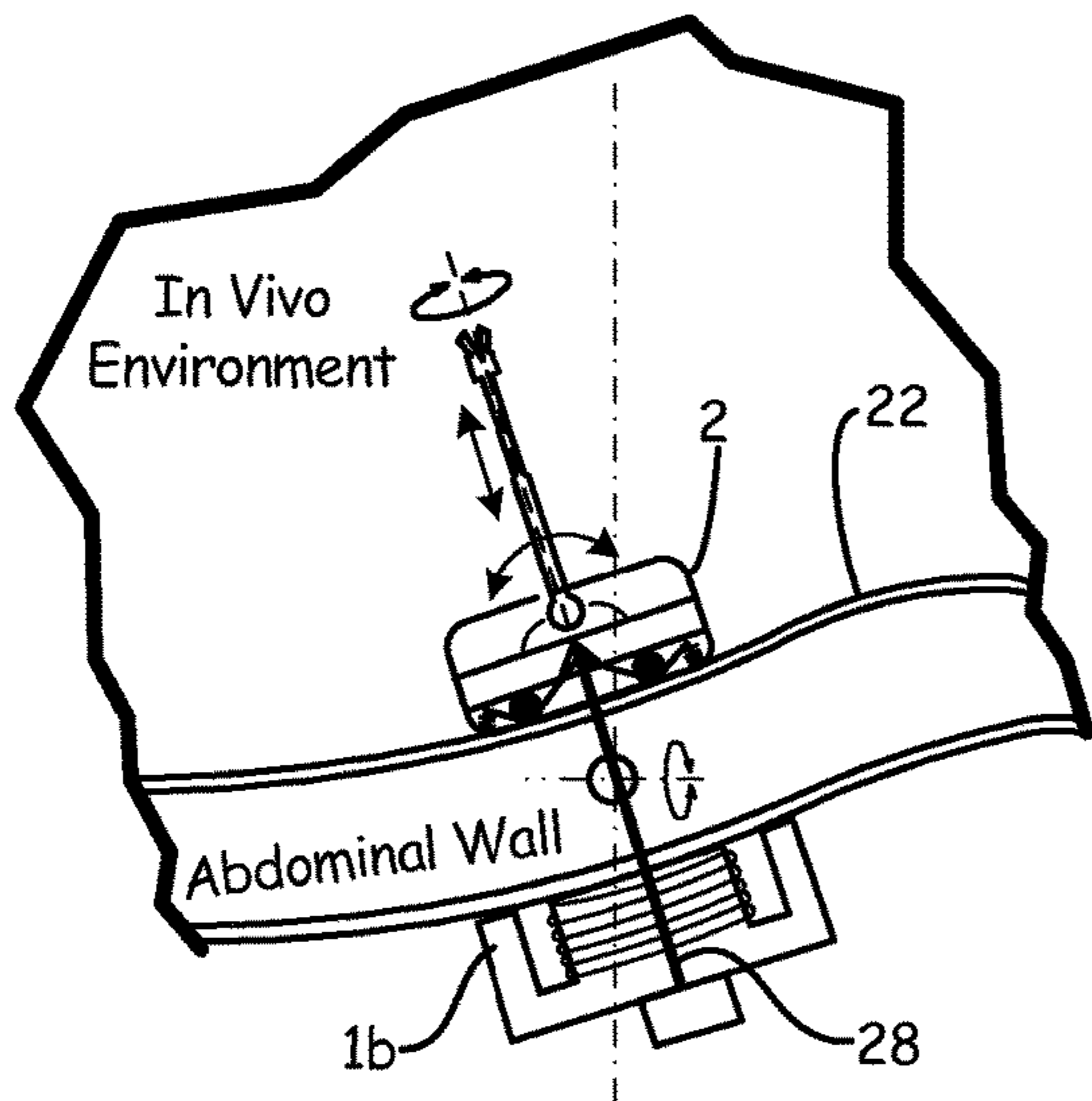


FIG. 30

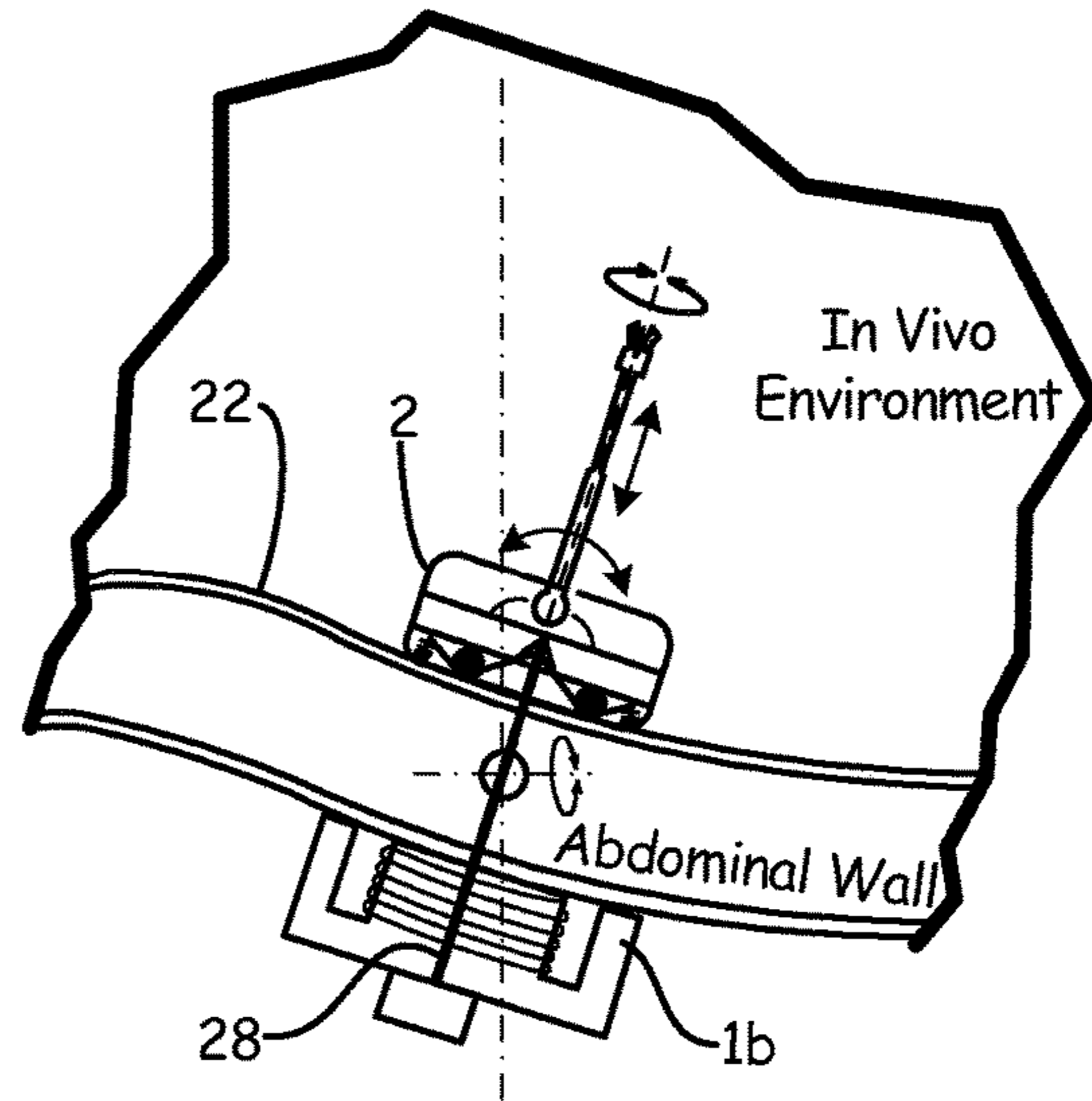


FIG. 31

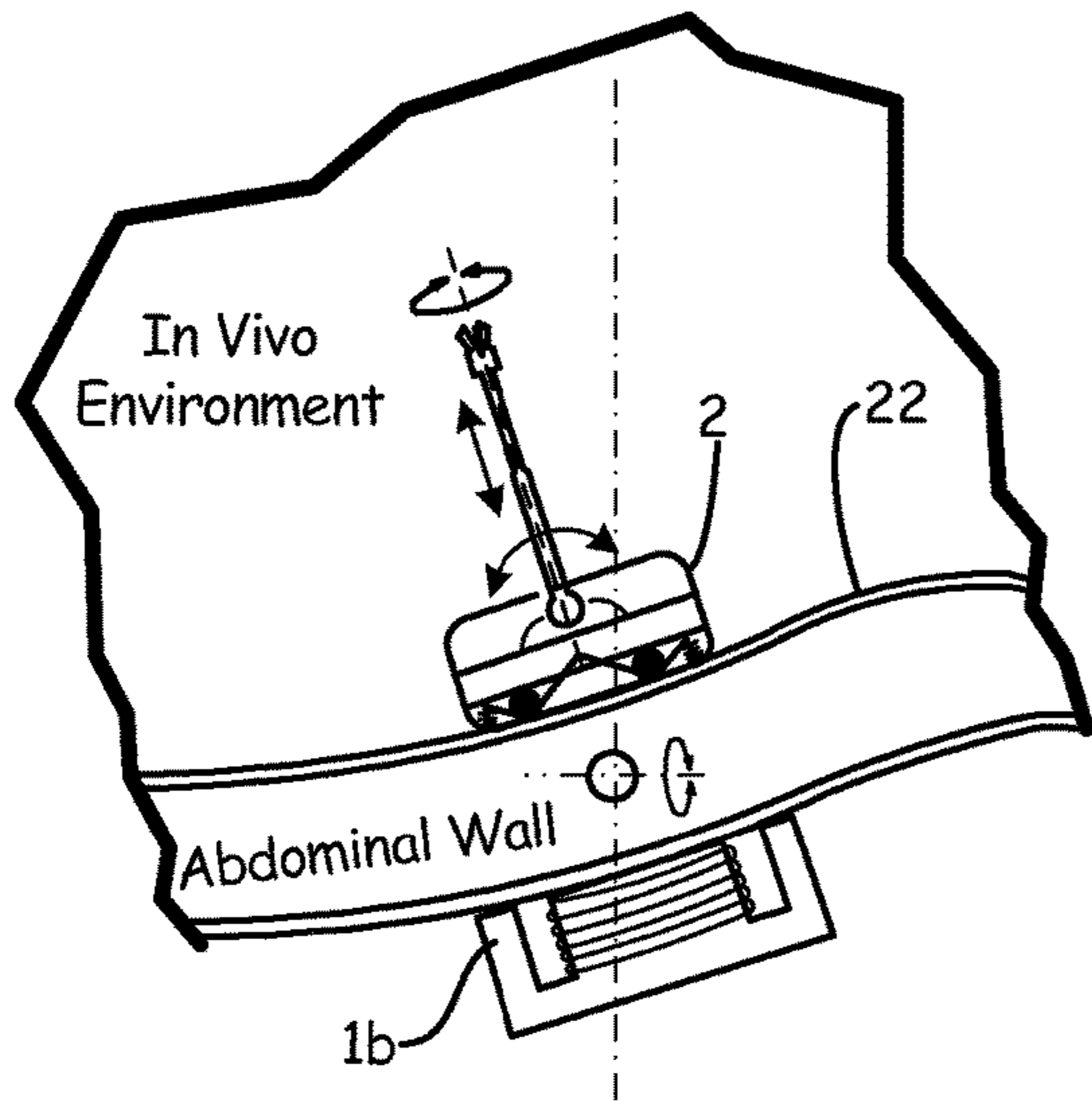


FIG. 32

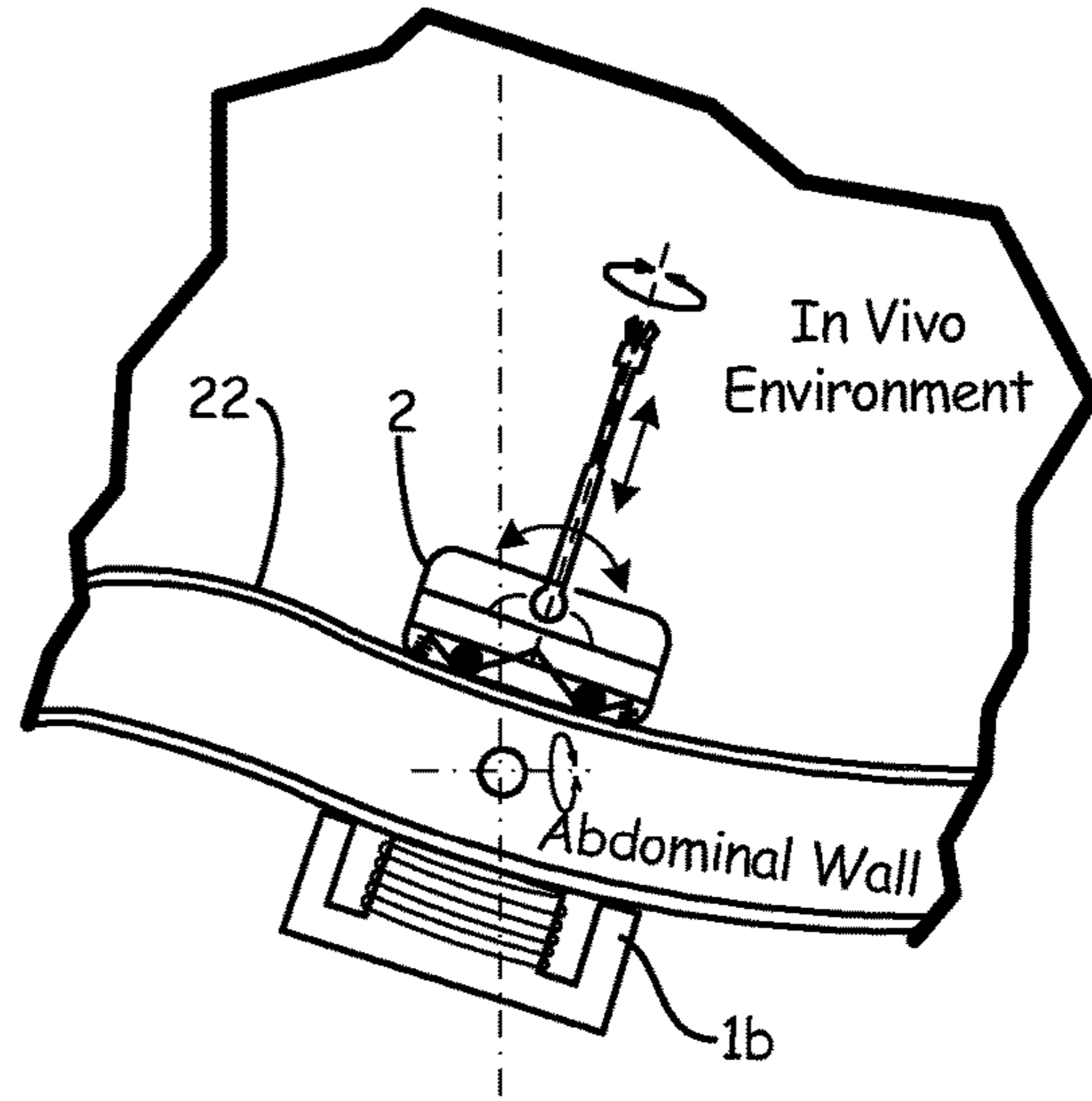


FIG. 33

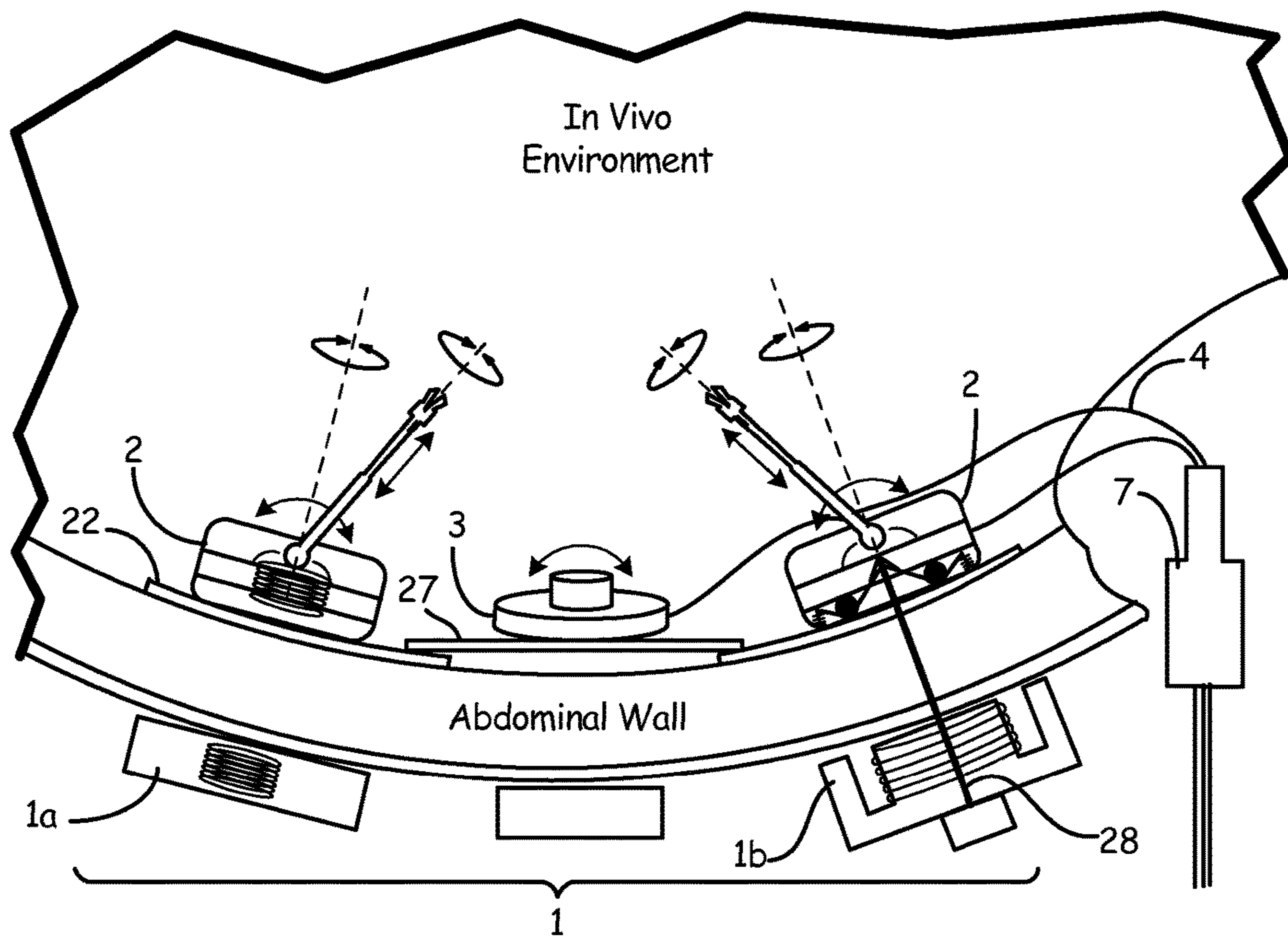


FIG. 34

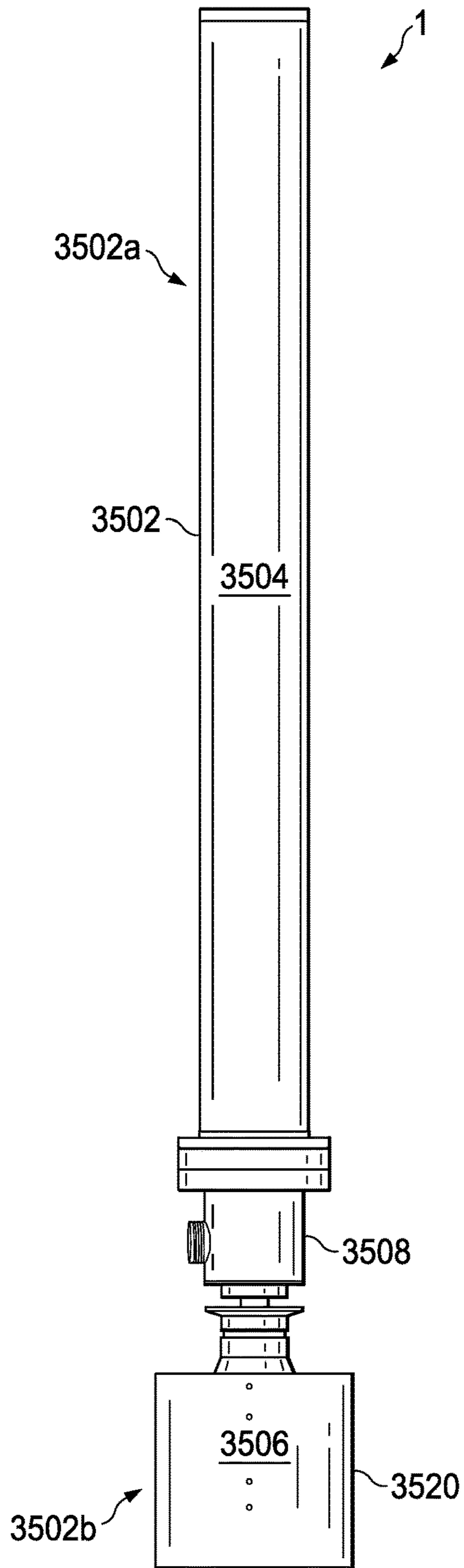


FIG. 35A

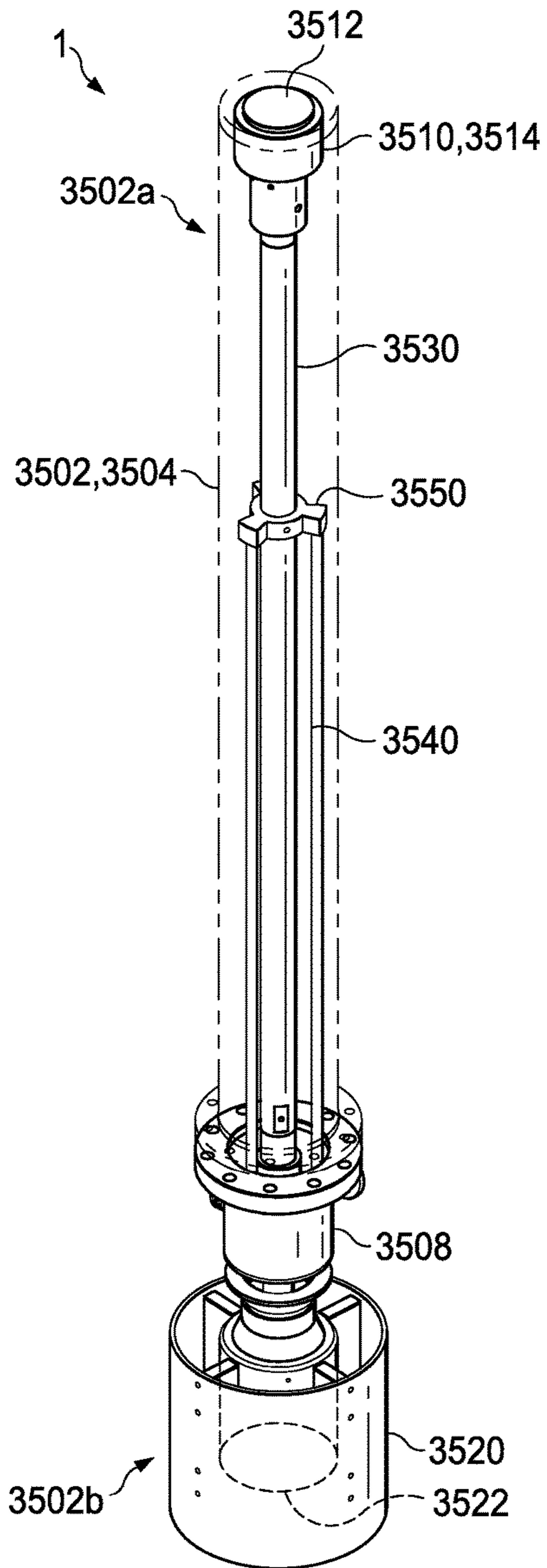


FIG. 35B

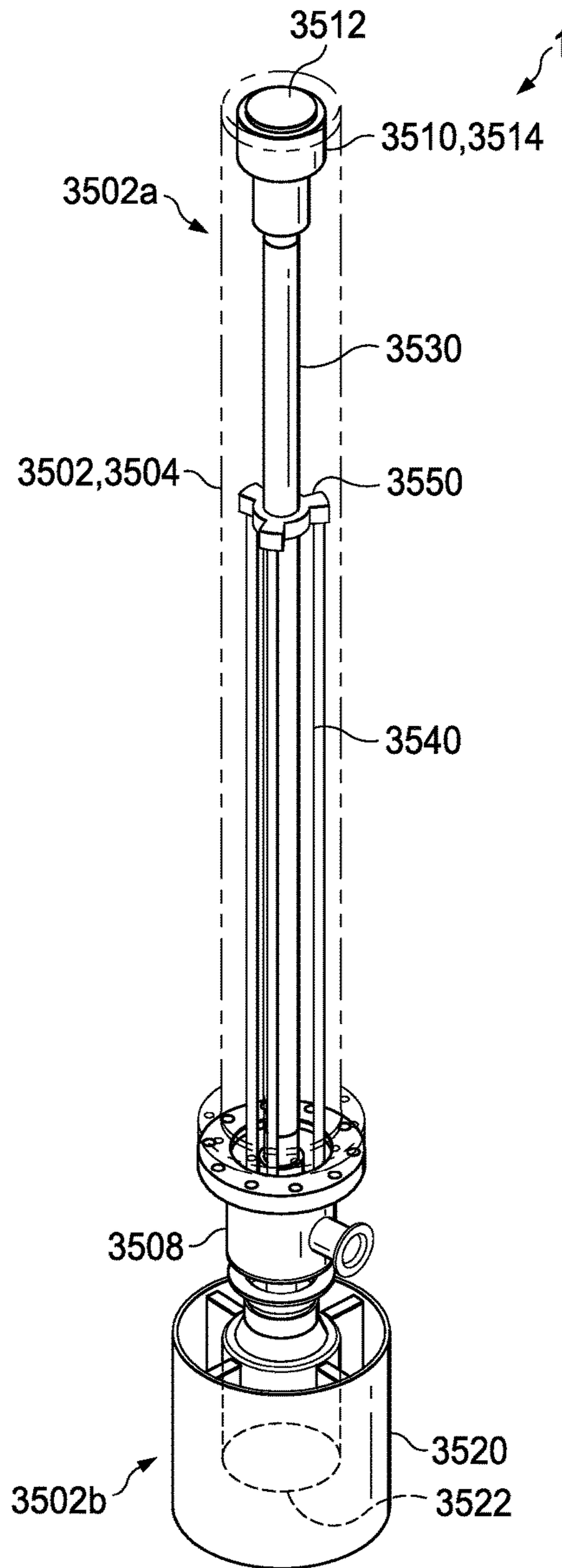


FIG. 35C



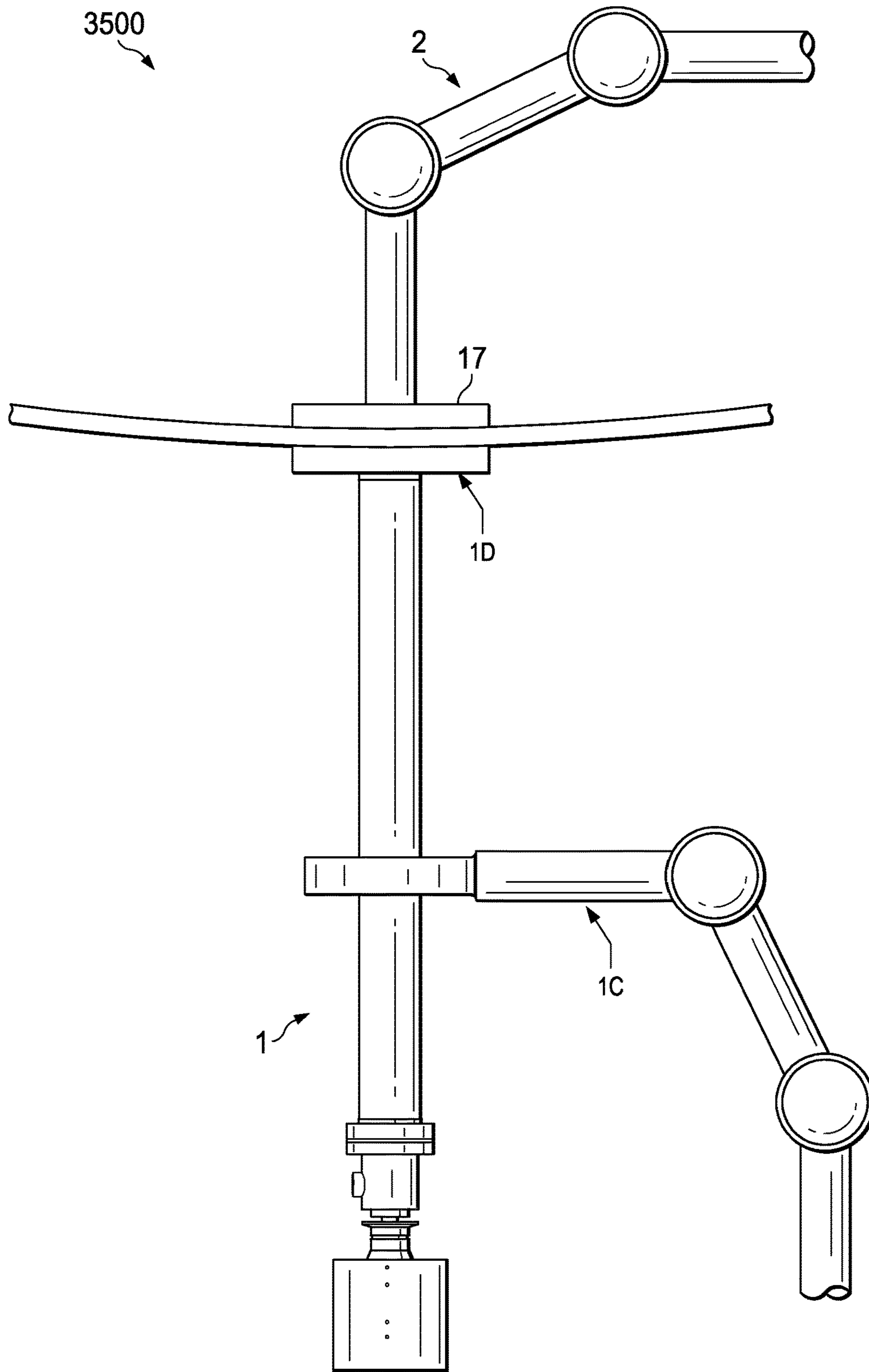


FIG. 35D

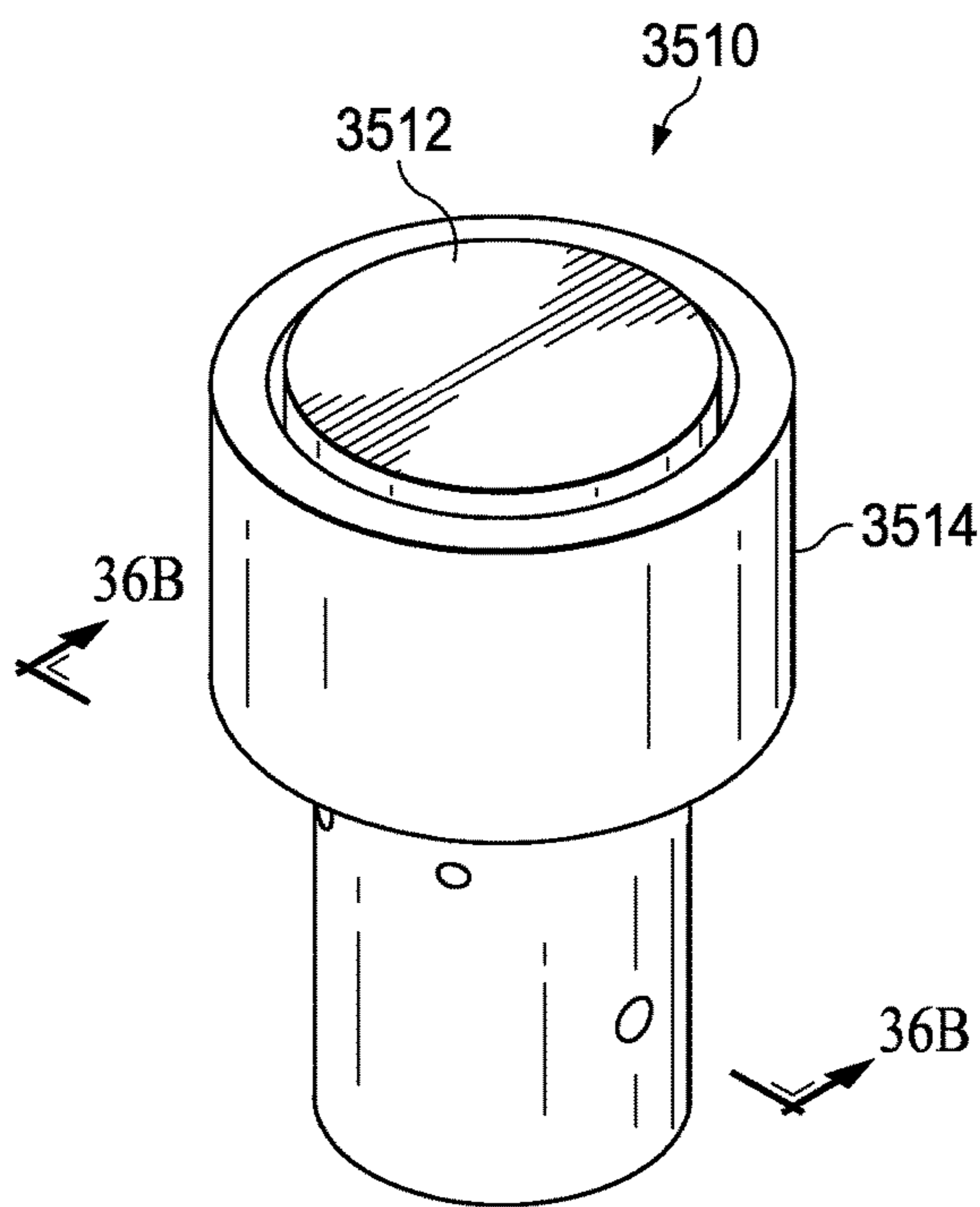


FIG. 36A

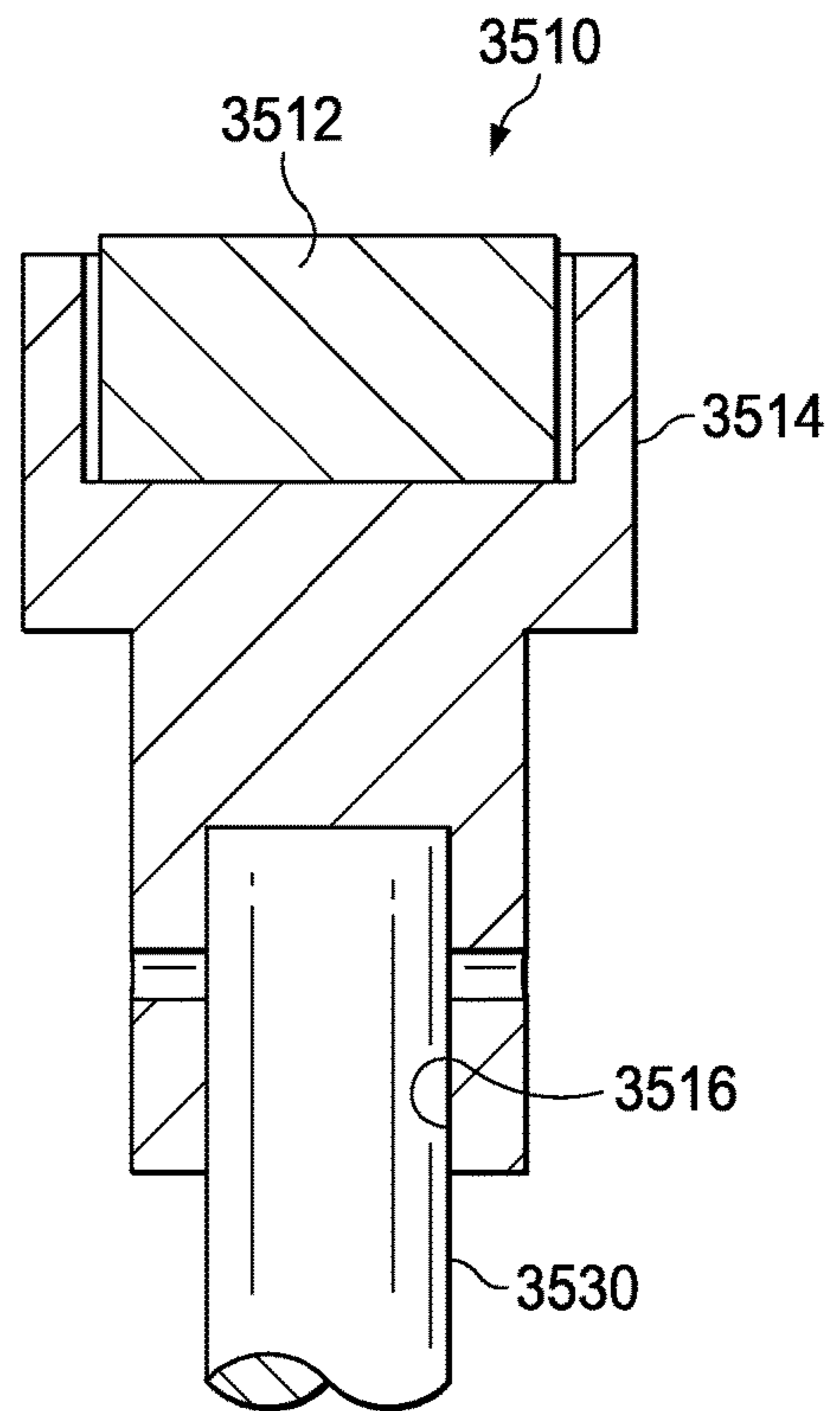


FIG. 36B

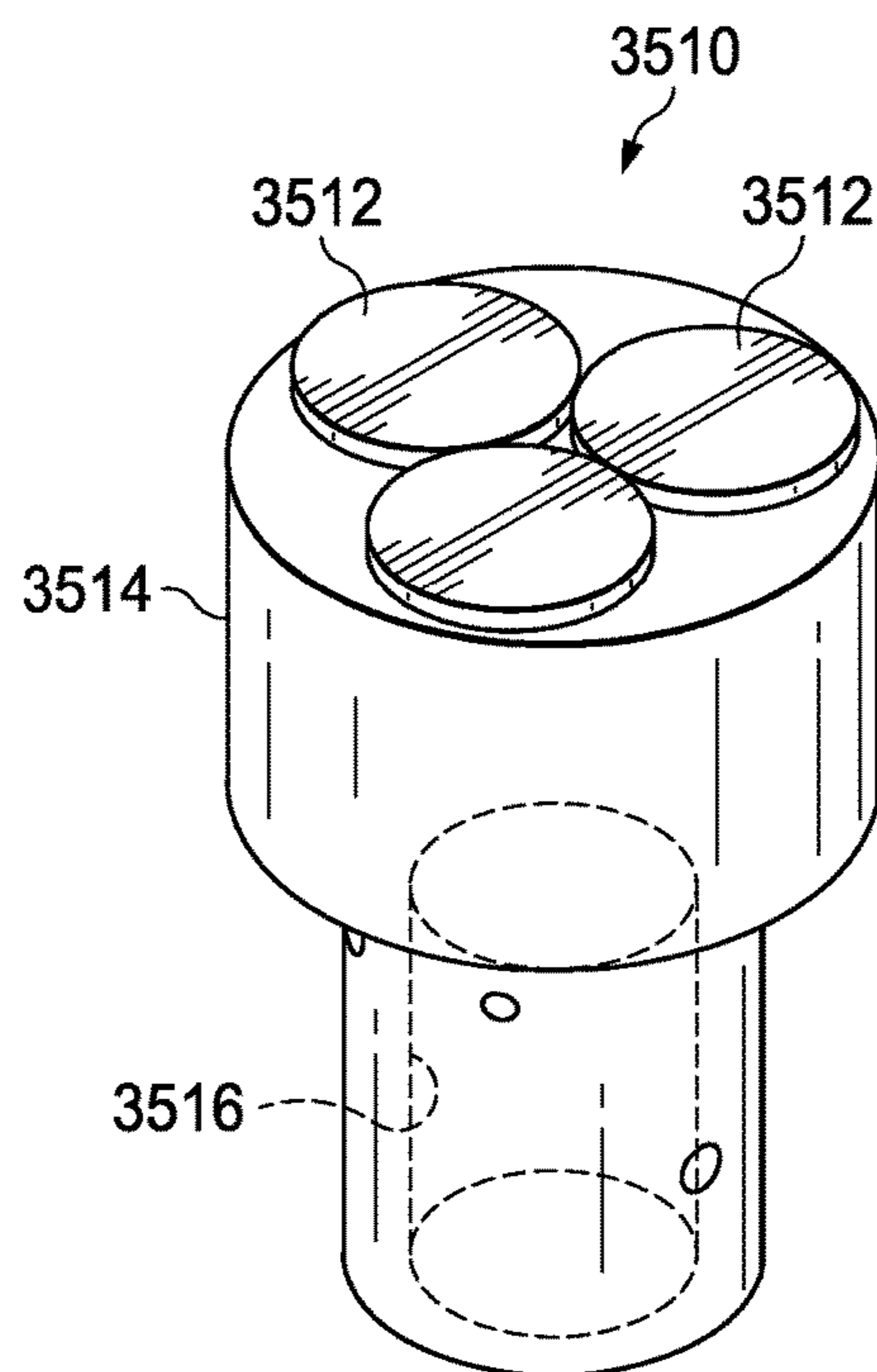


FIG. 36C

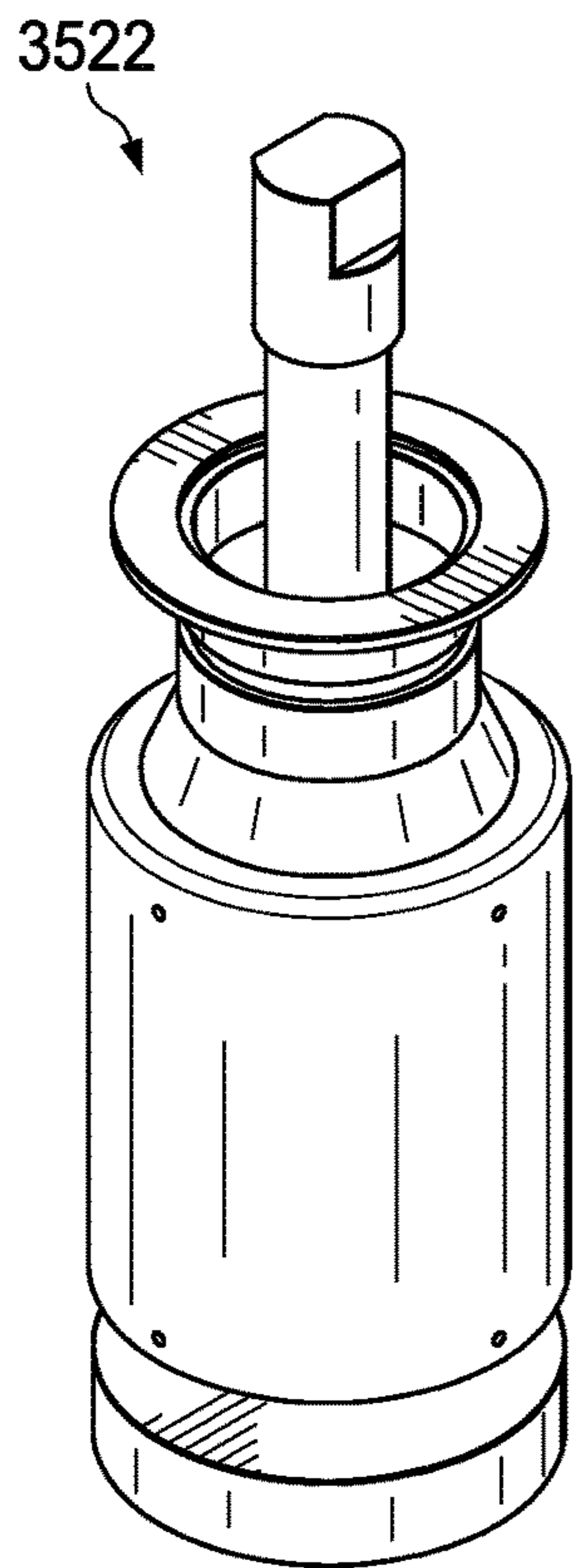


FIG. 37A

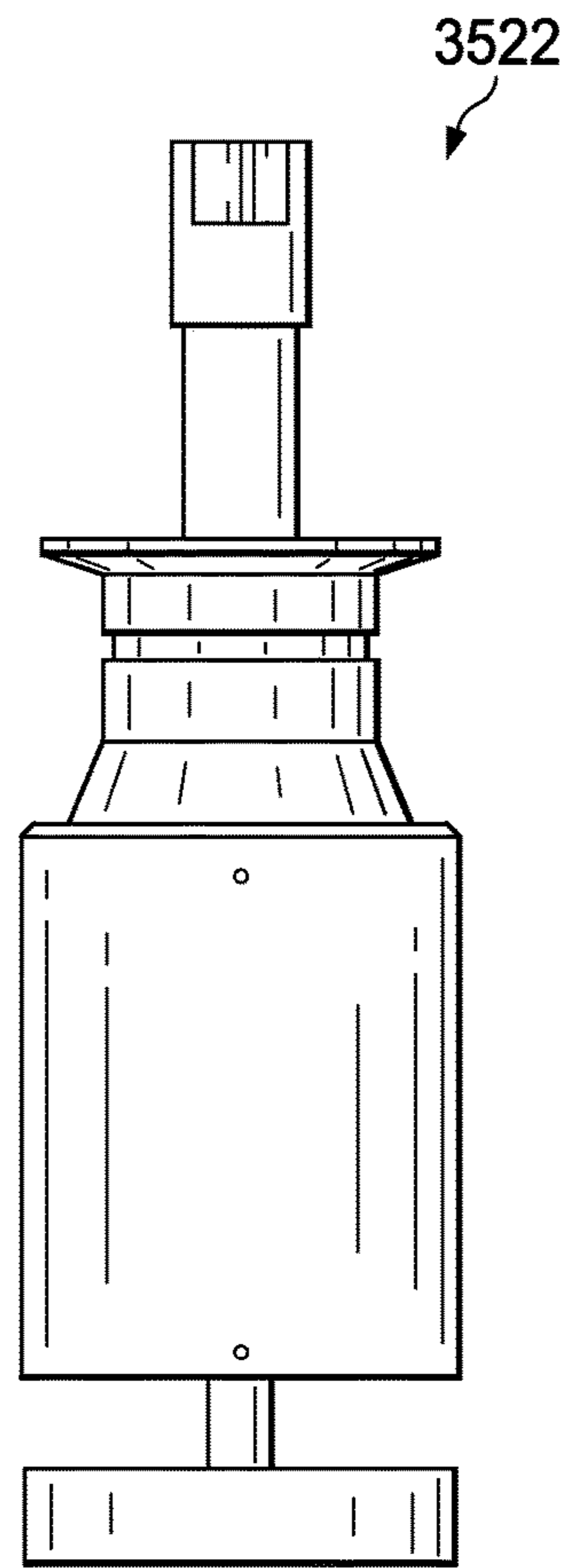


FIG. 37B

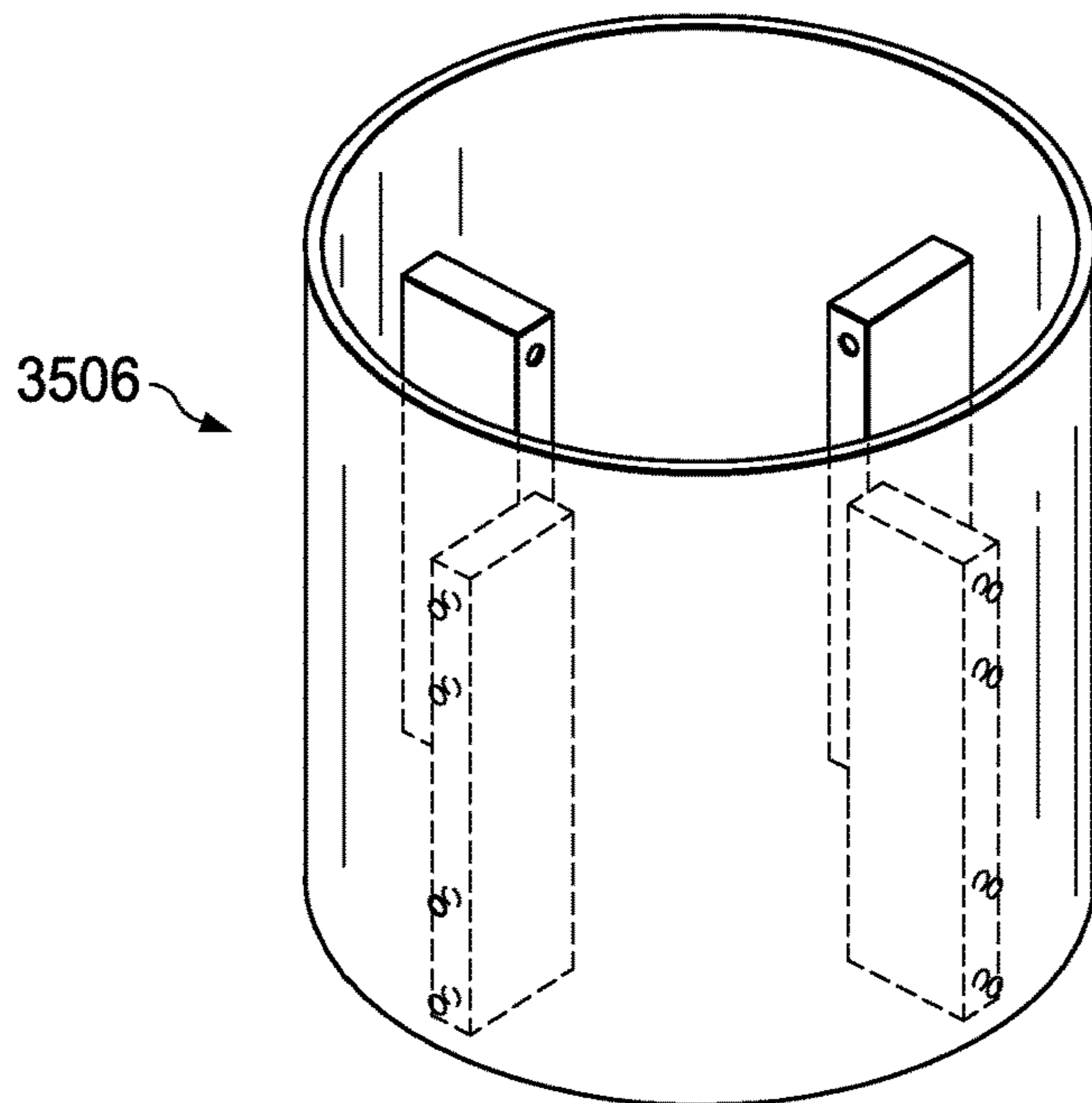


FIG. 37C

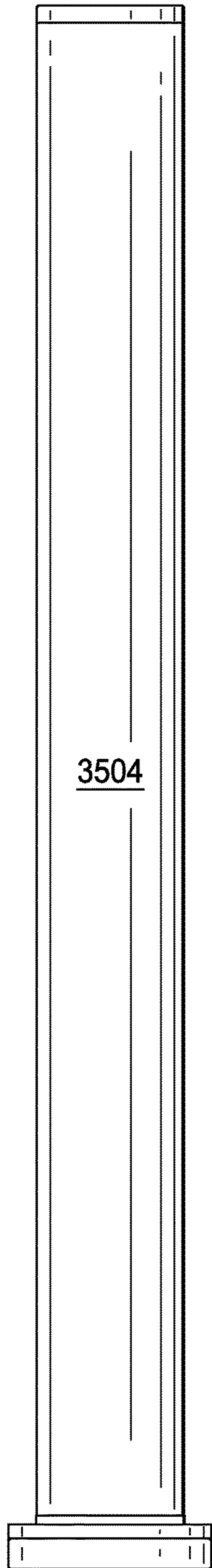


FIG. 38A

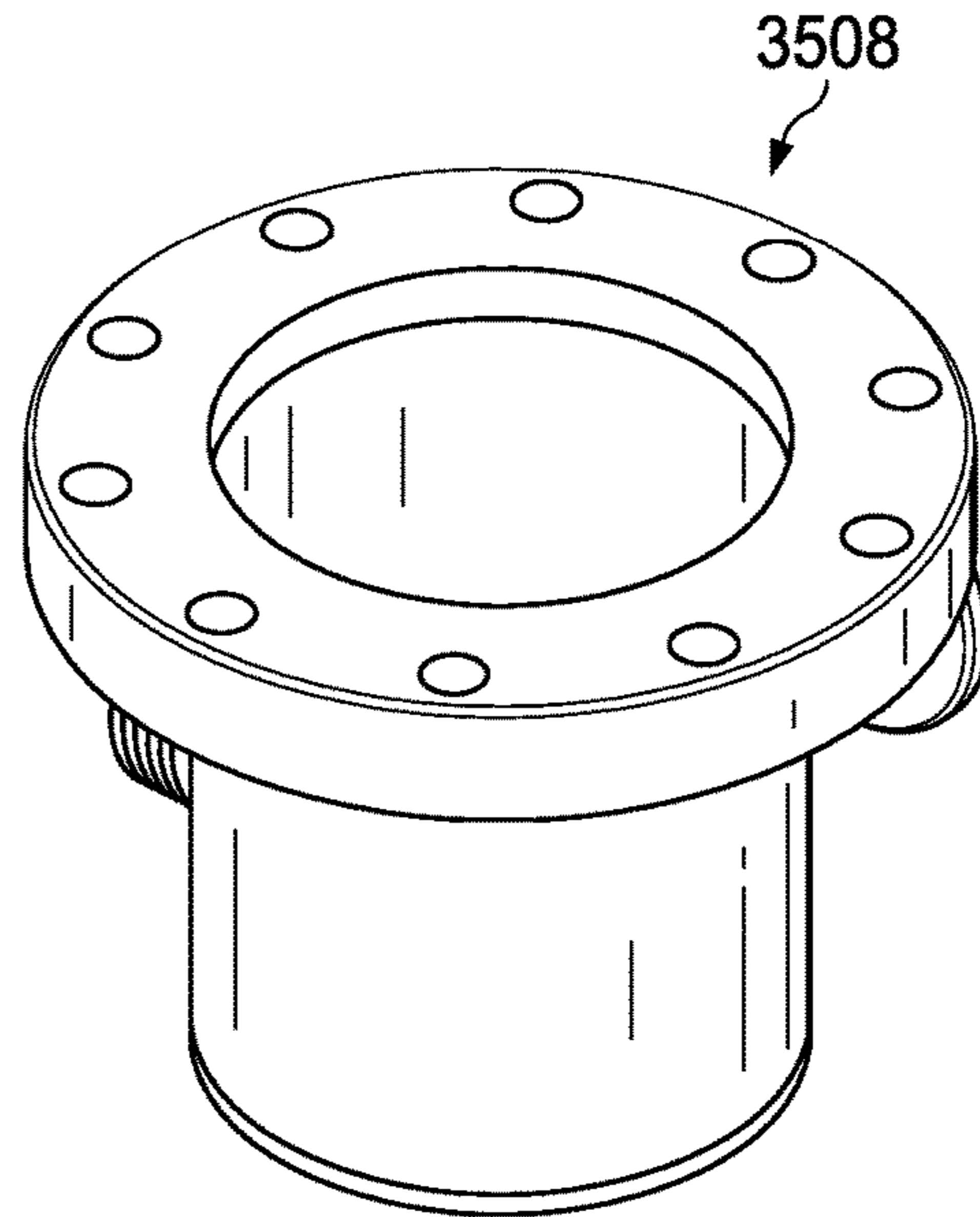


FIG. 38B

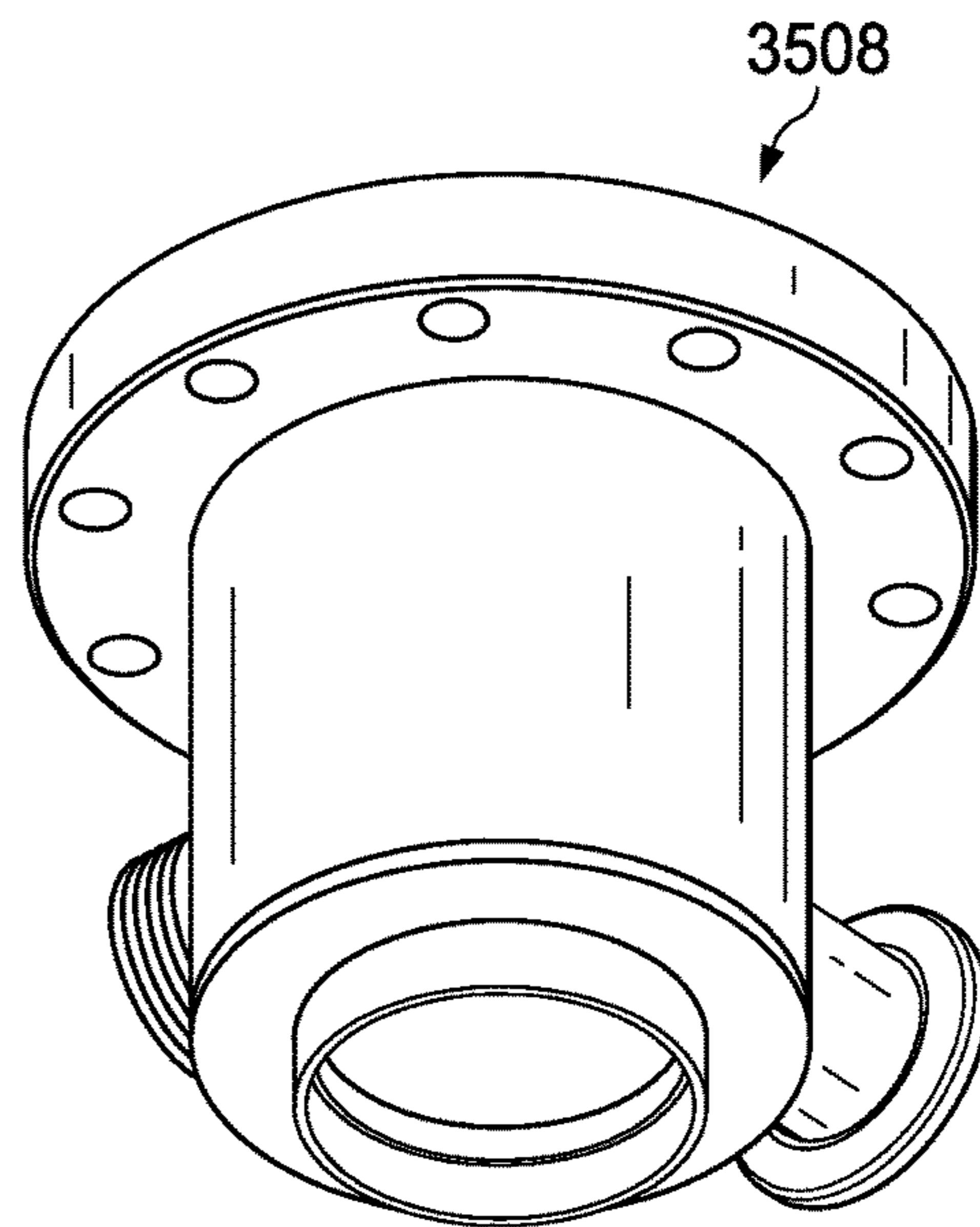


FIG. 38C

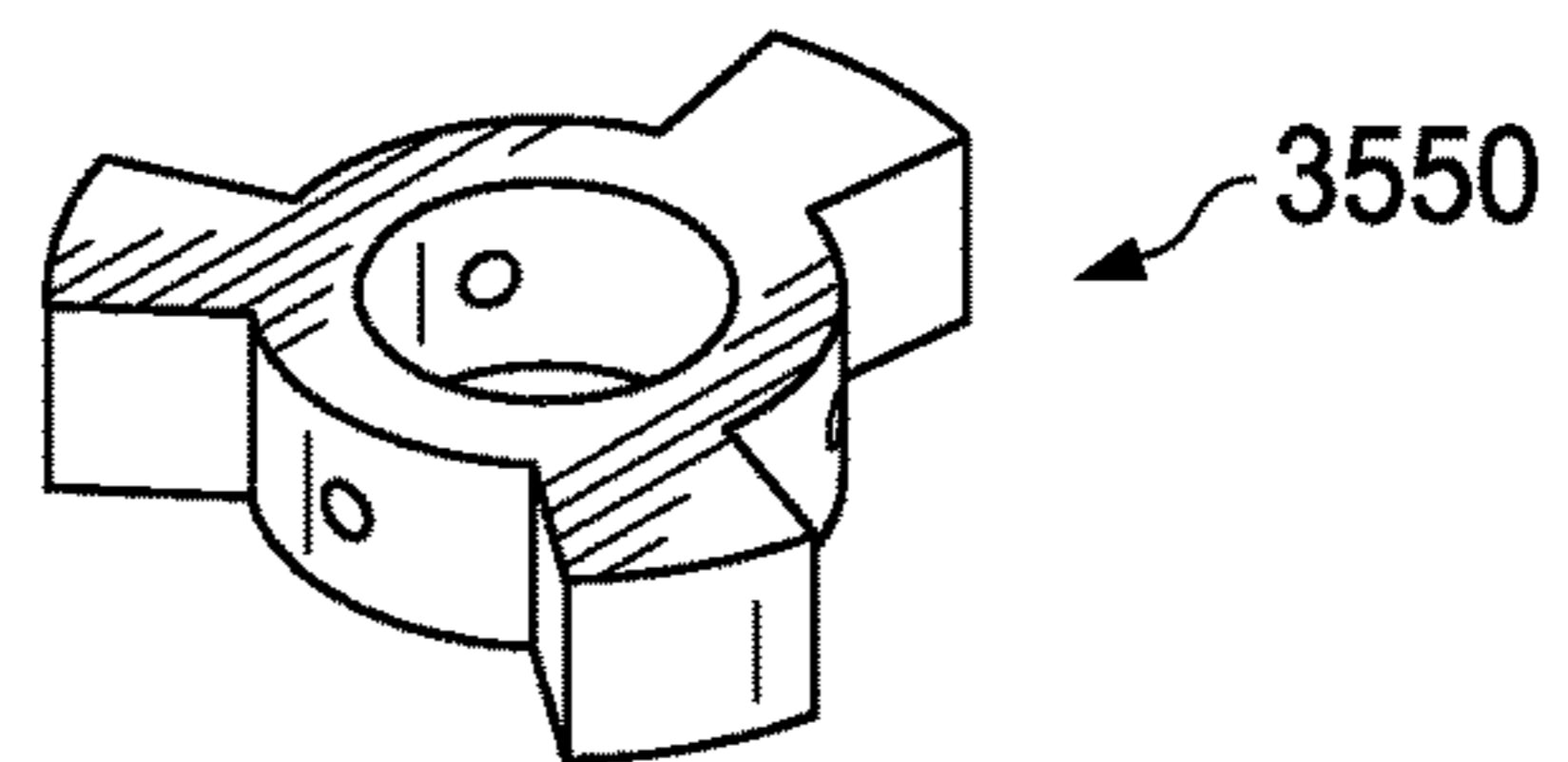


FIG. 39

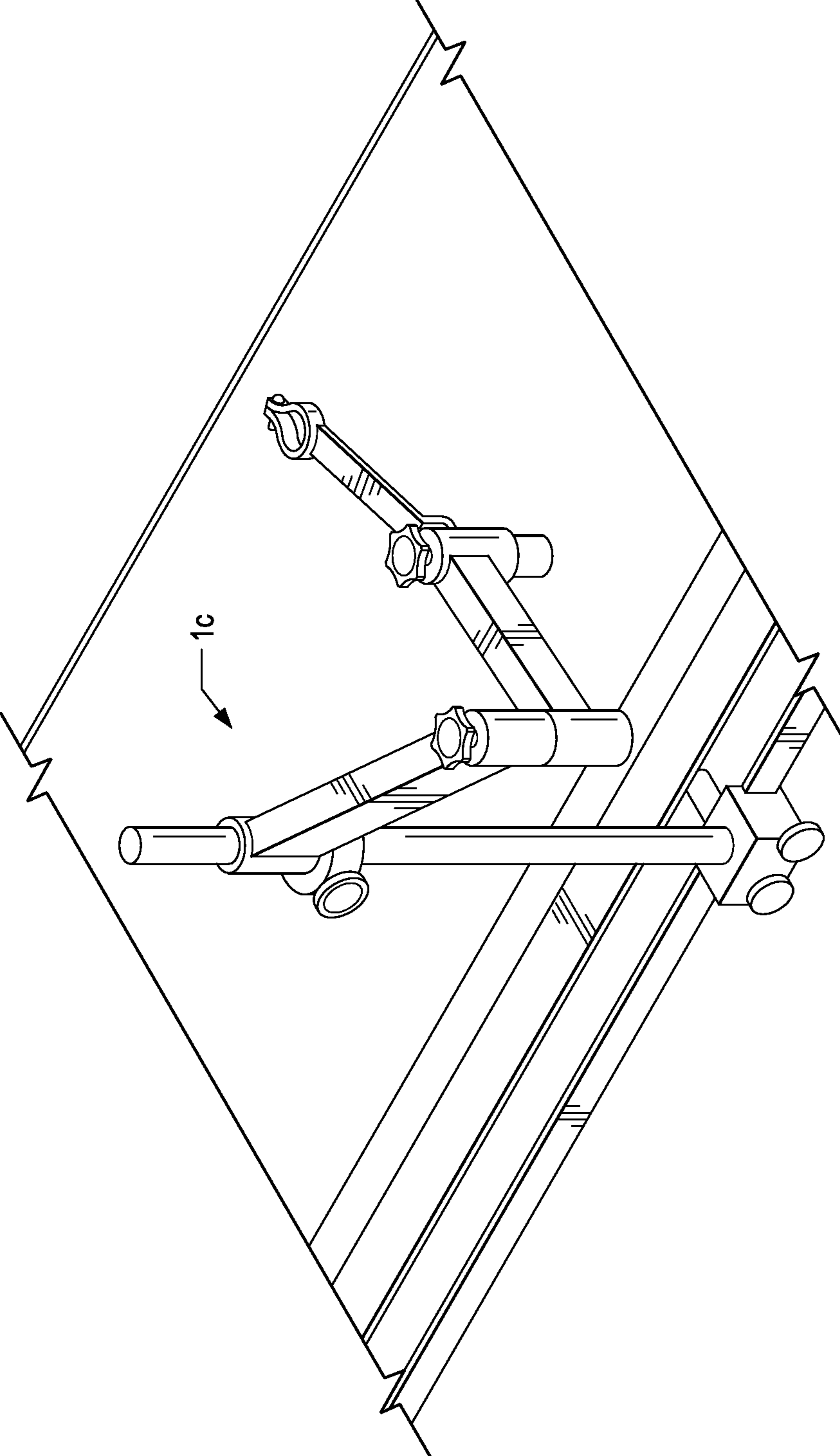
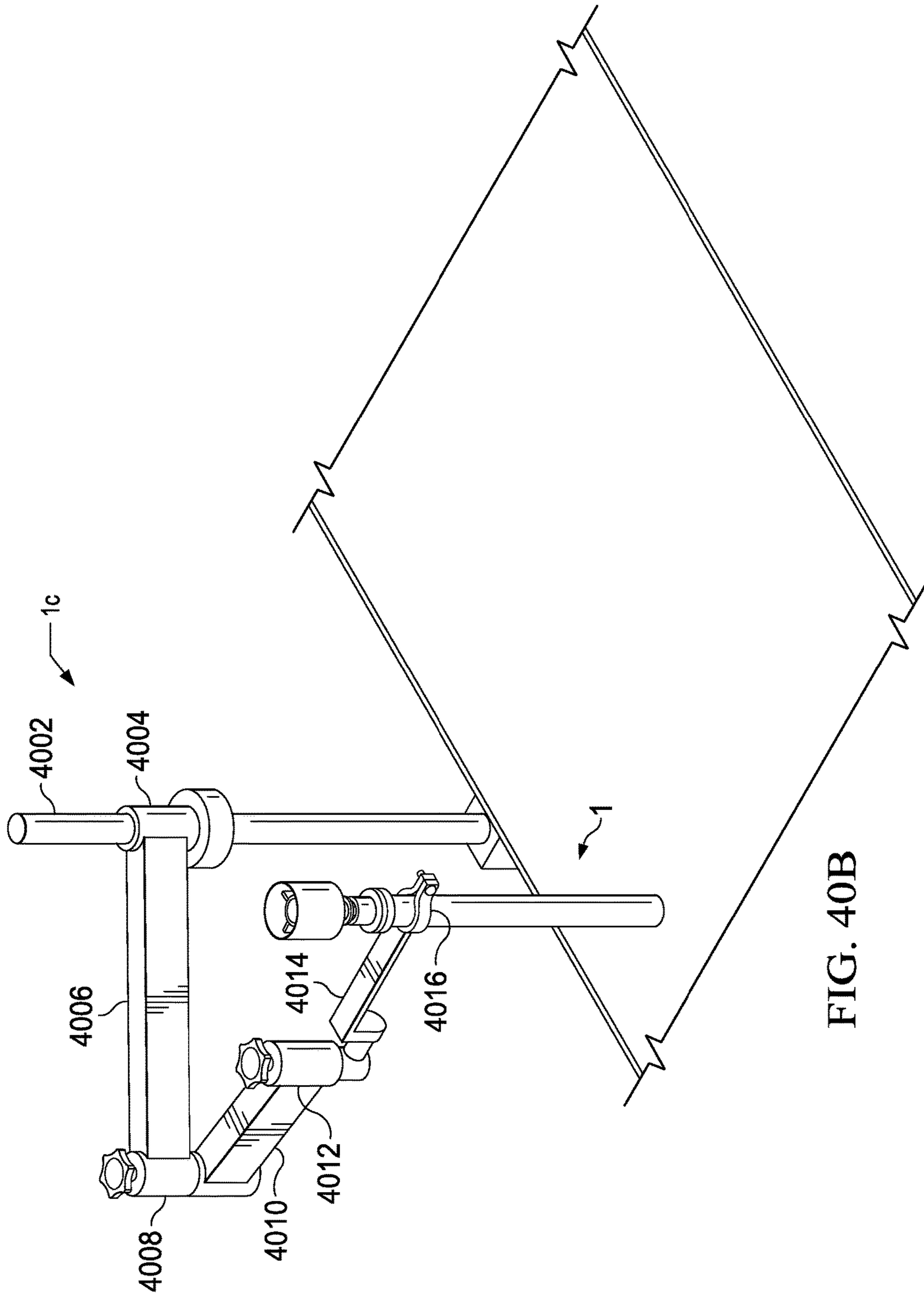


FIG. 40A



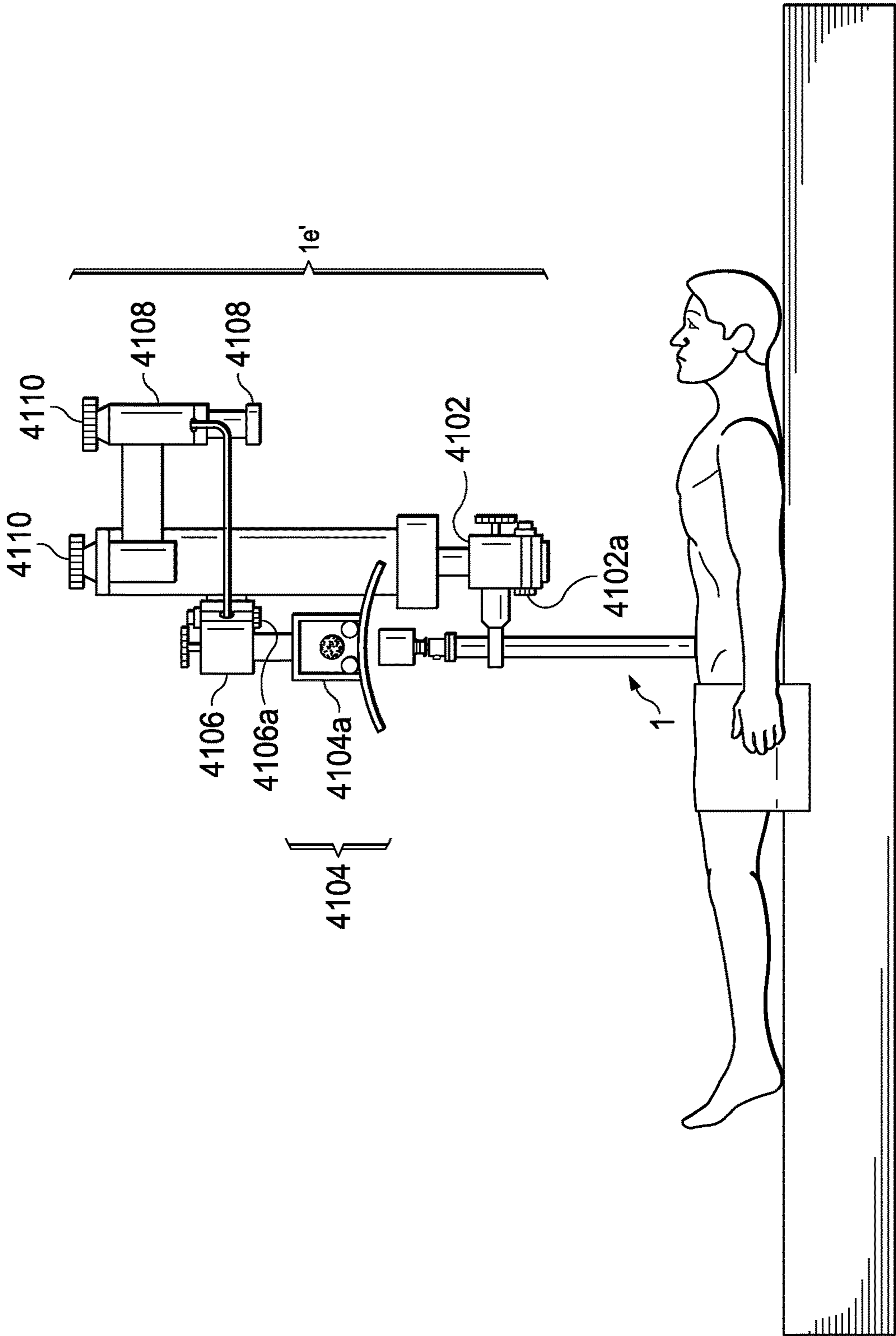


FIG. 41

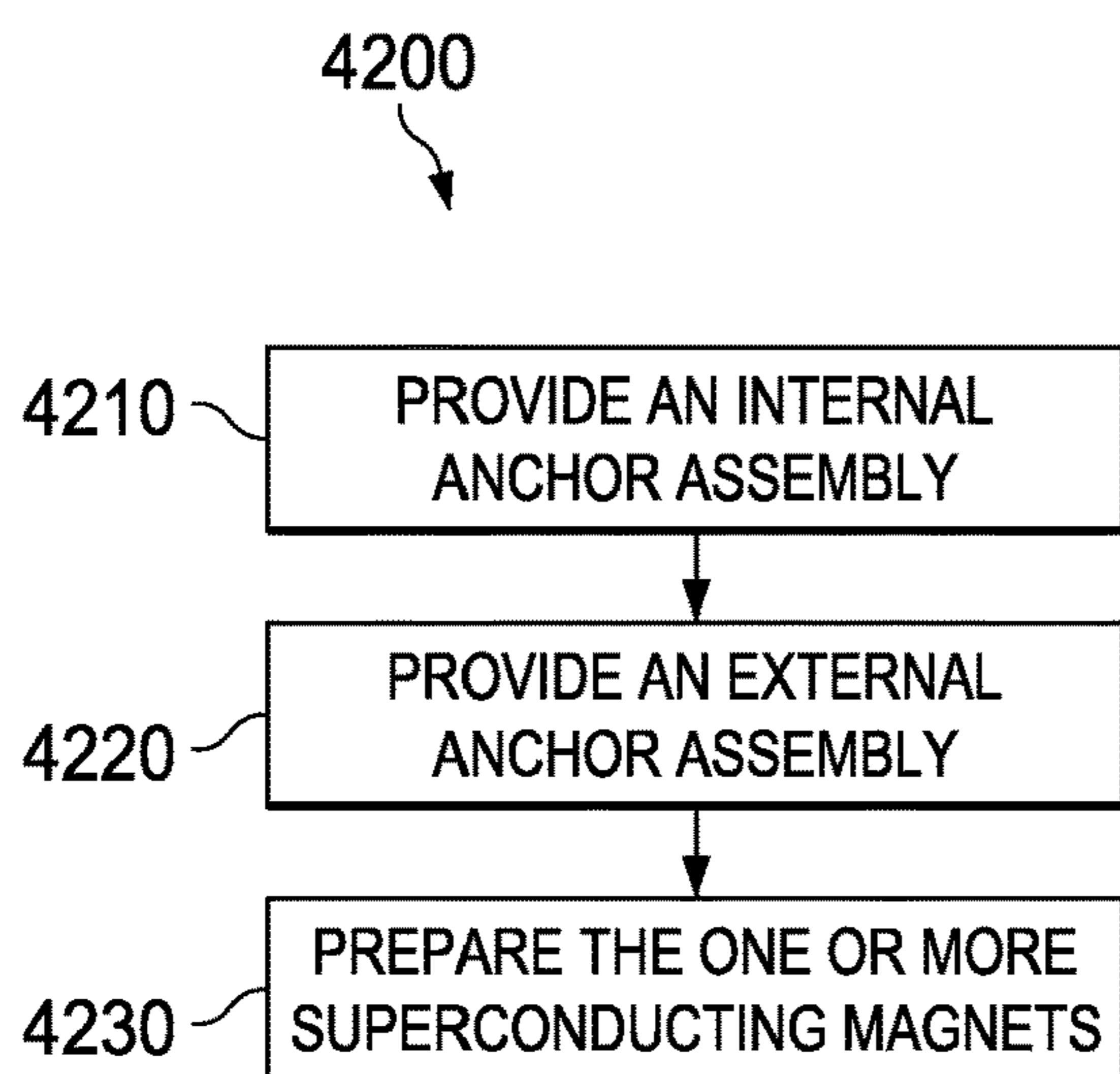


FIG. 42

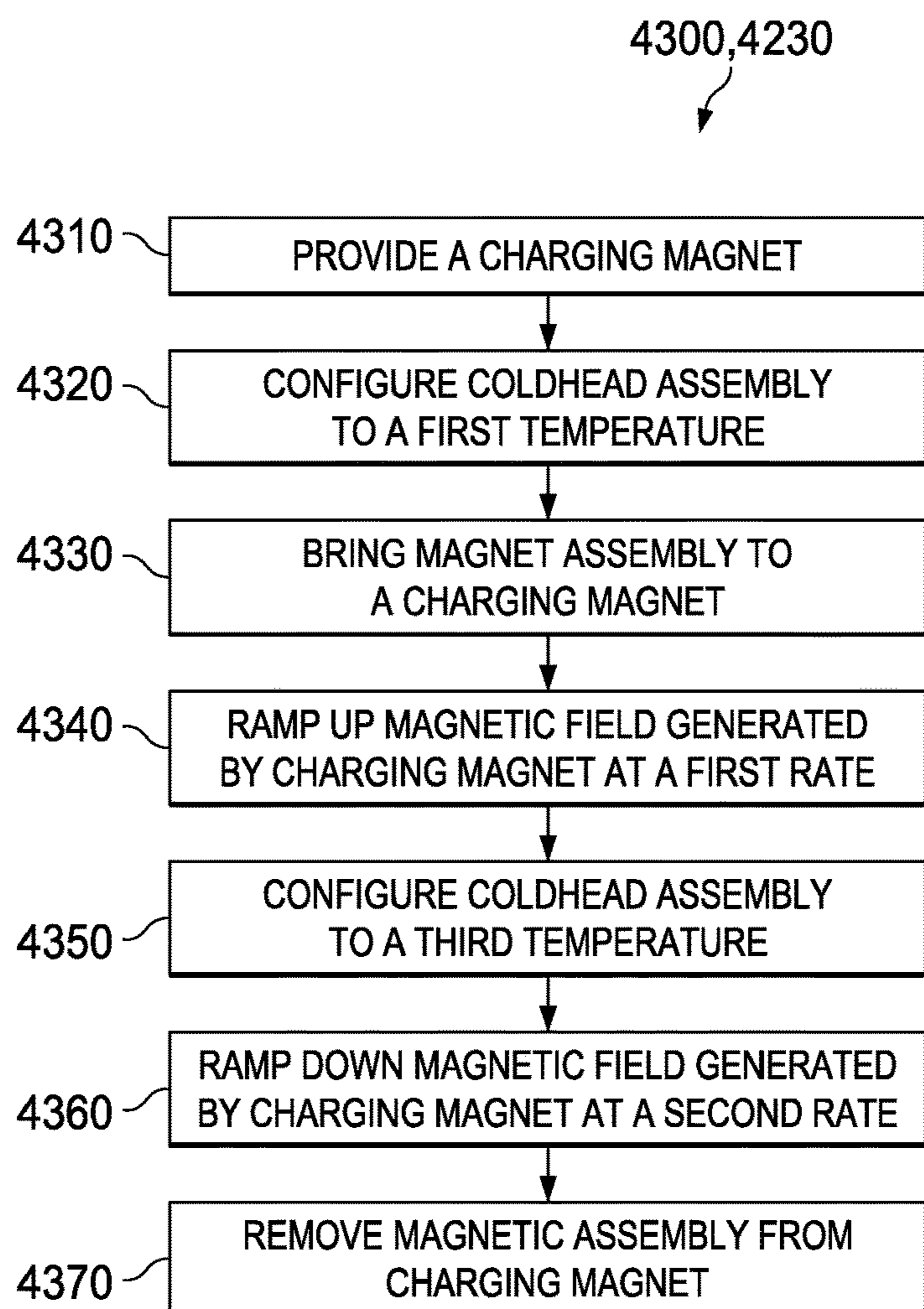


FIG. 43



**MAGNETIC-ANCHORED ROBOTIC SYSTEM****CROSS-REFERENCE TO RELATED APPLICATIONS**

This application is a continuation-in-part of U.S. application Ser. No. 13/871,915, filed on Apr. 26, 2013, which claims priority to U.S. Provisional Application No. 61/638,828, filed Apr. 26, 2012, and U.S. Provisional Application No. 61/718,252, filed Oct. 25, 2012, the contents of all of which are hereby expressly incorporated by reference in their entirety including the contents and teachings of any references contained therein.

In addition, this application relates to U.S. application Ser. No. 13/835,653, filed Mar. 15, 2013, U.S. application Ser. No. 13/835,680, filed Mar. 15, 2013, now U.S. Pat. No. 8,891,924, and U.S. application Ser. No. 13/871,926, filed Apr. 26, 2013, now U.S. Pat. No. 9,020,640, titled "Magnetic-Anchored Robotic System," the contents of all of which are hereby expressly incorporated by reference in their entirety including the contents of any references contained therein.

**BACKGROUND**

Surgeons have traditionally depended on external illumination from the operating room light and adequate exposure to obtain a good surgical view. This often requires large incisions, to provide access for the operation. The introduction of fiber optics in modern endoscopes has allowed surgeons to see clearly with good illumination inside a bodily cavity without having to make a big incision. Minimally Invasive Surgery (MIS) has now replaced most conventional open surgical operations. Computer-assisted or robotic technology has contributed further to the development of MIS as the computer sensors of the robotic machine can reliably and delicately translate the movements of the surgeon's fingers and wrists into movements of the slave laparoscopic instruments inside the body cavities. These developments have allowed good dexterity and precision control of surgical instruments for fine reconstructive surgery in a small confined space.

However, the MIS approach requires multiple incisions for the insertion of the camera and various laparoscopic instruments. Over the past few years, Laparo-Endoscopic Single-Site (LESS) surgery technologies have become available, but these suffer immensely from a lack of proper triangulation between the camera and the working instruments, which is important for good operative ergonomics and hence ease and success of surgery.

Natural orifice transluminal endoscopic surgery (NOTES) is an alternative to open abdominal surgery that uses endoscopic techniques with a view to completely avoid the need for external abdominal wall incisions. Theoretically, NOTES offers advantages by minimizing access trauma and the various complications associated with external incisions including wound infections, pain, hernia formation, unsightly abdominal scars and adhesions.

However, the NOTES approach suffers from significant drawbacks including inadequacy of proper triangulation of surgical instruments and hence poor working ergonomics, an inability to apply off-axis forces, and difficulties in passing multiple instruments into the abdominal cavity for proper surgical manipulations.

**BRIEF SUMMARY**

In an embodiment, a robotic actuator includes an internal anchor and an instrument. The internal anchor is adapted to

be inserted into a body via an entrance port, positioned inside the body, and magnetically coupled with an external anchor positioned outside the body. The instrument is adapted to be inserted into the body via the entrance port and secured to the internal anchor. The instrument includes an end-effector having multiple degrees of movement via multiple axes, and a plurality of actuators that provide the multiple degrees of movement.

In another exemplary embodiment, a surgical system is described. The surgical system comprises an internal anchor assembly. The internal anchor assembly may be configurable to be inserted into and positioned inside a cavity of a body. The surgical system further comprises an external anchor assembly. The external anchor assembly may be configurable to magnetically couple to the internal anchor assembly. The external anchor assembly may comprise a magnetic assembly. The magnetic assembly may include one or more superconducting magnets configurable to generate a magnetic field. The magnetic assembly may further include a conductive housing for receiving the one or more superconducting magnets. The external anchor assembly may further include a temperature control section. The temperature control section may be configurable to control a temperature of the one or more superconducting magnets via the conductive housing. The external anchor assembly may further include an external anchor body configurable to receive the magnetic assembly and the temperature control section. The external anchor body may be fixably positionable outside of the body.

In another exemplary embodiment, an external anchor assembly is described. The external anchor assembly is for use with a surgical system. The surgical system includes an internal anchor assembly configurable to be inserted into and positioned inside a cavity of a body. The external anchor assembly comprises a magnetic assembly. The magnetic assembly includes one or more superconducting magnets configurable to generate a magnetic field. The magnetic assembly further includes a conductive housing for receiving the one or more superconducting magnets. The external anchor assembly further comprises a temperature control section. The temperature control section may be configurable to control a temperature of the one or more superconducting magnets via the conductive housing. The external anchor assembly further comprises an external anchor body. The external anchor body may be configurable to receive the magnetic assembly and the temperature control section. The external anchor body may be fixably positionable outside of the body. The magnetic assembly may be configurable to magnetically couple to the internal anchor assembly via the magnetic field.

In another exemplary embodiment, a method of configuring a surgical system is described. The method comprises providing an internal anchor assembly. The internal anchor assembly may be configurable to be inserted into and positioned inside a cavity of a body. The method further comprises providing an external anchor assembly. The external anchor assembly may include a magnetic assembly, a temperature control section, and an external anchor body. The magnetic assembly may include one or more superconducting magnets configurable to generate a magnetic field. The magnetic assembly may further include a conductive housing for receiving the one or more superconducting magnets. The temperature control section may include a heat rod and a cyro-cooler. The heat rod may be in contact with the conductive housing and the cyro-cooler. The external anchor body may be configurable to receive the magnetic assembly and the temperature control section. The method

may further comprise preparing the one or more superconducting magnets. The preparing the one or more superconducting magnets may include providing a charging field. The preparing the one or more superconducting magnets may further include configuring the cryo-cooler to a first temperature. The ambient temperature may be operable to bring a temperature of the one or more superconducting magnets to be lesser than or equal to a second temperature. The preparing the one or more superconducting magnets may further include bringing the magnetic assembly to the charging field. The preparing the one or more superconducting magnets may further include ramping up a magnetic field generated by the charging field at a first rate. The preparing the one or more superconducting magnets may further include configuring the cryo-cooler to a third temperature less than the first temperature. The third temperature may be operable to bring the temperature of the one or more superconducting magnets to be lesser than or equal to a fourth temperature less than the second temperature. The preparing the one or more superconducting magnets may further include ramping down the magnetic field generated by the charging field at a second rate. The preparing the one or more superconducting magnets may further include removing the magnetic assembly from the charging field when the magnetic field generated by the charging field reaches a final magnetic field value.

#### BRIEF DESCRIPTION OF THE DRAWINGS

FIG. 1 is a general schematic view of an exemplary surgical robotic system.

FIGS. 1A and 1B are front views of exemplary human-machine interfaces.

FIGS. 2A and 2B are perspective views of exemplary entrance ports.

FIG. 3 is a perspective view of an exemplary surgeon console.

FIG. 4A is a side view of an exemplary surgeon console.

FIG. 4B is a side view of an exemplary surgeon manipulator.

FIG. 4C is a side view of an exemplary micro robotic manipulator.

FIG. 4D is a perspective view of an exemplary surgeon manipulator.

FIG. 4E is a perspective view of the exemplary surgeon manipulator of FIG. 4D in an extended position.

FIG. 4F is an exploded view of the exemplary surgeon manipulator of FIG. 4D.

FIG. 4G is a side view of an exemplary surgeon console.

FIG. 5 is a side view of an exemplary patient table.

FIGS. 6A and 6B are side views showing 7-axis movement of an exemplary micro robotic manipulator.

FIGS. 7A and 7B are side views showing 7-axis movement of an exemplary micro robotic manipulator.

FIG. 8A is an end view and FIG. 8B is a side view of an exemplary foldable enclosure of a micro robotic manipulator.

FIG. 9 is a side view showing 2-axis movement of an exemplary 2D micro robotic camera.

FIG. 10 is a side view showing 2-axis movement of an exemplary 2D micro robotic camera.

FIG. 11A is an end view and FIG. 11B is a side view of an exemplary foldable enclosure of a micro robotic 2D-camera.

FIG. 12 is a side view showing 2-axis movement of an exemplary 3D micro robotic camera.

FIG. 13 is a side view showing 2-axis movement of an exemplary 3D micro robotic camera.

FIG. 14A is an end view and FIG. 14B is a side view of an exemplary foldable enclosure of a micro robotic 3D-camera.

FIG. 15 is a perspective view of an exemplary 3D micro robotic camera.

FIG. 16A is an end view of an exemplary micro robotic actuator in a folded configuration.

FIG. 16B is a side view of an exemplary micro robotic actuator in a folded configuration.

FIG. 16C is an end view of an exemplary micro robotic actuator in an unfolded configuration.

FIG. 16D is a side view of an exemplary micro robotic actuator in an unfolded configuration.

FIG. 17 is a perspective view of an exemplary micro robotic actuator in a folded state.

FIG. 18 is a perspective view of an exemplary micro robotic actuator in a folded state with the housing removed.

FIG. 19 is an exploded view of an exemplary micro robotic actuator.

FIG. 20 is an exploded view of an exemplary end effector.

FIG. 21 is a perspective view of an exemplary micro robotic actuator in an unfolded state.

FIG. 22 is a perspective view of an exemplary micro robotic actuator in an unfolded state with the housing removed.

FIG. 23 is a side view of an exemplary micro robotic manipulator in an in vivo environment.

FIGS. 24A and 24B are side views of an exemplary micro robotic manipulator in an in vivo environment.

FIG. 25 is a schematic view of an exemplary surgical robotic system including a fine metal wire.

FIGS. 26A and 26B are front views of exemplary human machine interfaces.

FIG. 27 is a side view showing insertion of an exemplary fine metal wire.

FIG. 28 is a side view showing locking of an exemplary fine metal wire to a miniature robot.

FIG. 29 is a side view showing an example of force of tightening by a fine metal wire.

FIG. 30 is a side view showing exemplary X-Y movement of a micro robotic manipulator to the left with a fine metal wire.

FIG. 31 is a side view showing exemplary X-Y movement of a micro robotic manipulator to the right with a fine metal wire.

FIG. 32 is a side view showing exemplary X-Y movement of a micro robotic manipulator to the left without a fine metal wire.

FIG. 33 is a side view showing exemplary X-Y movement of a micro robotic manipulator to the right without a fine metal wire.

FIG. 34 is side view of an exemplary intra abdominal mechanical frame.

FIG. 35A is a cross-sectional view of an exemplary external anchor assembly.

FIG. 35B is a perspective view of an exemplary external anchor assembly.

FIG. 35C is another perspective view of an exemplary external anchor assembly.

FIG. 35D is a side view of an exemplary system having an exemplary external anchor assembly fixably positioned outside of a body by an exemplary support structure and magnetically coupled to an exemplary internal anchor assembly.

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FIG. 36A is a perspective view of an exemplary magnetic assembly having one or more superconducting magnets.

FIG. 36B is a cross-sectional view of an exemplary magnetic assembly having one or more superconducting magnets.

FIG. 36C is a cross-sectional view of an exemplary magnetic assembly having three stacks of one or more superconducting magnets.

FIG. 37A is a perspective view of an exemplary cryo-cooler.

FIG. 37B is a side view of an exemplary cryo-cooler.

FIG. 37C is a perspective view of a portion of an exemplary external anchor body for receiving an exemplary cryo-cooler.

FIG. 38A is a side view of a portion of an exemplary external anchor body.

FIG. 38B is a perspective view of a portion of an exemplary external anchor body.

FIG. 38C is another perspective view of a portion of an exemplary external anchor body.

FIG. 39 is an example illustration of an exemplary supporting clamp.

FIGS. 40A and 40B are perspective views of an exemplary support structure.

FIG. 41 is a side view of an exemplary controllable swivel assembly of an exemplary support structure.

FIG. 42 is an example illustration of a method of configuring a surgical system.

FIG. 43 is an example illustration of a method of preparing one or more superconducting magnets.

## DETAILED DESCRIPTION

A Magnetic-anchored Robotic System (MRS) allows computer-assisted minimally-invasive surgery using multiple independent in-vivo miniature robots that can have a full seven-degrees of freedom of movement in different axis (note that in addition to the degrees of freedom of movement of the miniature robots discussed below, two more degrees of freedom are available by translating the miniature robots along the abdominal wall). Intra-abdominal operations can be performed under the surveillance of an in-vivo swivel camera under remote control by the surgeon through an external computer console. Each of the miniature robotic instruments, camera and other devices may be inserted into the abdominal cavity via either a single incision (for example, through the umbilicus) or through a natural orifice and may be secured into position by an external electro-magnetic anchoring and positioning device outside the abdominal wall at selected sites to provide operative ergonomics and triangulation between camera and instruments. The control of such miniature robotic system inside the abdominal cavity can be, for example, via a wired or a hybrid combination of wired and wireless communications, depending on the situation and the condition of the patient. In some arrangements, power will be transmitted to the miniature robotic instruments (effectors), by a pair of conductors, while the control signals of the same can be transmitted by wire or wirelessly.

The camera as well as all laparoscopic instruments can be inserted into the abdominal cavity through a single incision or through a natural orifice. The laparoscopic instruments can then be anchored and positioned through an external electro-magnet placed outside the abdominal wall. MRS can therefore allow MIS to be performed with the benefits of both computer-assisted or robotic surgery, as well as using

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either only a single incision or through a natural orifice. An exemplary MRS may include:

(i) one or more externally-mounted electro-magnetic anchoring and positioning devices;

(ii) multiple internal electro-magnetic anchoring devices, each fitted with an independent miniature robotic surgical instrument capable of, for example, seven-degrees freedom of movements via multiple axis; and

(iii) a surgeon's computer console that provides surgical control and manipulation.

Thus, exemplary advantages including minimized access trauma, provision of unrestricted or less restricted and more dexterous movement of instruments inside the cavity and enabling proper or improved triangulation of instruments for optimal or improved operative ergonomics can be achieved.

Referring to FIG. 1, the system may include one or more magnetic or electromagnetic location fixing device(s) 1 (hereafter collectively referred to as the electromagnetic location fixing device 1, which includes examples including permanent/non-electric magnets unless otherwise specifically excluded) placed on the outer abdominal wall associated with remotely controlled robotic manipulator(s) 2 inside the body. The electromagnetic location fixing device 1 may include a servo mechanism that is remotely controlled to control the position of the internal electromagnetic anchoring device. The robotic manipulator inside the human body can therefore be moved and be positioned by an externally supplied magnetic field interacting with one or more permanent magnets or electromagnets included in the electromagnetic location fixing device 1 together with the internal electromagnetic anchoring device. Such an externally supplied magnetic field may be moved by a X-Y servo mechanism to a designated position thus relocating the robotic arm 24 to the designated position and then refix again as shown in FIG. 24. As another example, the electromagnetic location fixing device 23 shown in FIG. 23 may be in the form of a linear induction stator on the outside of the abdominal wall such that when an alternating current of appropriate frequency is applied to the stator on the outside of the abdominal wall, the inside flap 24 will levitate and move forward. When such an alternating current is applied in pulse form, the inside flap 24 will move forward in small steps. Such control may also be provided by a control computer.

For illustrative purposes, each location fixing device is shown with one robotic manipulator; however, there may be multiple robotic manipulators for one location fixing device or multiple location fixing devices for one robotic manipulator. For example, each device may detect the current position of the end effector of the corresponding multi-axis micro robotic manipulator 2 inside the human body. The multi-axis micro robotic manipulator 2 inside the body may detect the current position of the end effector. The micro robotic manipulator 2 may include various end effectors such as a gripping device 16 (for example, as shown in FIG. 6) and an imaging device 3 for performing a given treatment and visualizing the in vivo environment respectively.

The manipulator 2 can be folded and inserted into the body cavity through an entrance port 7 in the form of a hollow cylinder mounted on a minimal invasive opening or the like of the patient. It may be connected to a flexible cable 4 passing through the entrance port 7 and linked to a central control computer 8 via an electrical wire 5 or wirelessly. The entrance port 7 is in the range of 1.5-2 cm in diameter in some examples but may vary. The range of 1.5-2 cm is advantageous as it is big enough for equipment (manipula-

tors, etc.) to pass through and small enough to be accommodated by most natural orifices.

Referring to FIGS. 2A and 2B, the entrance ports 207' and 207" may be shaped to accommodate flexible cables 204' and 204" in a manner that permits multiple of the manipulators 2 to be inserted through the same single entrance port 207. An inner wall of the entrance ports 207' and 207" includes 207" includes one or more recesses of a shape complementary to the wires 204' and 204".

In the example shown in FIG. 2A, the recesses 208' in the inner wall of the entrance port 207' are slot shaped and include a flat surface to accommodate the flat cable 204'. In some examples, a cross section of the inner wall may be in the shape of a polyhedron having the recesses 208' immediately joining an adjacent recess 208'. In other examples, the recesses 208' may be distributed circumferentially about the inner surface of the entrance port 207'. The recesses 208' may be distributed equally or unequally about the inner surface of the entrance port 207'.

In the example shown in FIG. 2B, the recesses 208" in the inner wall of the entrance port 207" are rounded to accommodate the round cable 204". In some examples, the recesses 208" immediately join an adjacent recess 208". In other examples, the recesses 208" may be distributed circumferentially about the inner surface of the entrance port 207". The recesses 208" may be distributed equally or unequally about the inner surface of the entrance port 207".

It will be appreciated that the above described shapes are exemplary in nature and can be selected from a variety of other shapes according to a particular implementation. Providing the recesses 208 allows for the use of the same entrance port for many of the manipulators 2 by clearing the opening of the entrance port 207 of the cables 204 to allow passage of another manipulator 2. In this way, trauma associated with the insertion of entrance ports, trocars, etc., can be minimized by reusing the same single entrance port for several or all of the manipulators 2.

Depending on the application, the signal transmission between the remotely controlled micro robotic manipulator 2 and the central control computer 8 can be performed through a wired connection (for example, via the entrance port 7 over a conductive cable or an optical cable) or a wireless connection (for example, via inductive coupling with a pickup coil incorporated in the location fixing device as shown in device 1a). Power for the manipulator 2 may also be supplied via the location fixing device 1 wirelessly through the abdominal wall. A hybrid such as a wired power supply and wireless control signal may also be used.

Also, in cases where the electromagnetic location fixing device 1 is controllable by the central control computer 8, a wired or wireless connection may be provided from the central control computer 8 to the electromagnetic location fixing device 1. Alternatively, or in addition, electromagnetic location fixing device 1 may communicate wirelessly with the micro robotic manipulator 2, which is connected to the central control computer 8 through a wired connection, for example via the entrance port 7, to provide communication between the electromagnetic location fixing device 1 and the central control computer 8. The central control computer 8 may control positioning servos of the electromagnetic location fixing device 1 as well as activating/deactivating a fixing control. The fixing control may be, for example, activating an electromagnet in the electromagnetic fixing device 1. The fixing control is not necessarily a discrete on/off control and may also be variable.

The central control computer 8 can adjust the positions and actions of the manipulators 2 independently of each

other by the corresponding movement of the trigger unit 10b, 11b controlled by an operator through a human machine interface 9 connecting to the controller via a cable 6. The interface 9 may include a display screen 10a, 11a and a pair of trigger units 10b, 11b, which may be different types such as the remote operation type 10 shown in FIG. 1A and multi-axis end-effector simulator type 11 shown in FIG. 1B. In the multi-axis end-effector simulator type 11, the trigger unit 11b has a multi-axis robotic joint that can provide fine position control of the end effector of the manipulator 2 with several degrees of freedom. The movement control can also include force feedback.

Also, the number of inserted miniature robots is not limited to the number that can be controlled by one operator through the human machine interface 9. A second human machine interface may be provided for an assistant operator to also control miniature robots if needed for the operation.

Referring to FIG. 3, a main surgeon 100 controls a pair of controls 102 while an assistant 104 working on the same surgeon console 106 or another surgeon console controls additional controls 108. The main surgeon 100 and/or the assistant 104 may also control various cameras. The main surgeon 100 and the assistant 104 can view the same display 110 or they may view separate displays, for example, showing different views of the patient. The display 110 may be a 2D display, a 3D display, a naked eye 3D display, or other type of suitable display. The assistant 104 may simultaneously operate and assist in the operation. Two or more operators may advantageously work on the same patient at the same time while maintaining dialog with each other. It will be appreciated that while a main surgeon and an assistant surgeon have been described, the console 106 may be operated by any one or two (or more) operators generically.

Referring to FIGS. 3 and 4A, the surgeon console 106 may be ergonomically arranged including one or more of the foot rest 114, the arm rest 116 and the seat 118. The foot rest 114 may incorporate switches to switch the controls 102 (and/or the controls 108) to control the camera instead of the manipulators/robots or vice-versa. The foot rest 114 may also incorporate controls to control manual focusing of the camera(s). The foot rest 114, arm rest 116, controls 102, controls 108 and/or any combination thereof may include sensor/actuators to detect the presence of the operator in order to enable/disable the robotic system.

The surgeon console 106 may also be arranged to avoid light reflection. For example, the display 110 may be positioned such that at least a portion is below a height of the table 120 at which the surgeon sits. The display 110 may also be angled such that reflections are not passed or reduced to the viewer at the table 120. The light shelter 122 may also be provided to reduce ambient lighting that may could cause reflections.

Haptic feedback may be provided to the main surgeon 100 and/or the assistant 104. A resisting force may be measured by the in-vivo robotic manipulator 2, for example via an onboard sensor such as a load cell. The resisting force may also be estimated from an amount of energy (e.g., voltage, current or power) used by the manipulator 2. Force feedback based on the resisting force may be provided to the main surgeon 100 and/or the assistant 104 via the manipulators 102 and 108 respectively.

For example, with reference to FIGS. 4B and 4D-4F, a surgeon's manipulator 102 may include motor/encoders 402, 404, 406, 408, 410, 412 and 414. The motor/encoder 402 may detect and provide haptic feedback for pitch. For example, the motor/encoder 402 may be coupled to a joint

element **403** with a bushing/washer **405** there between. Thus, the motor/encoder can detect rotation with respect to the joint element **403** and provide haptic feedback to this axis of movement. The motor/encoder **404** may detect and provide haptic feedback for sway. The motor/encoder **406** may detect and provide haptic feedback for wrist yaw. The motor/encoder **408** may detect and provide haptic feedback for extension/retraction. For example, the motor/encoder **408** may be coupled to the linear guide rail **409**. As the linear guide rail is extended/retracted by the surgeon/operator, the motor/encoder **408** is rotated. Thus, the motor/encoder **408** can detect extension/retraction and provide haptic feedback to this axis of movement. The motor/encoders **410** and **412** may detect and provide haptic feedback for gripping. The motor/encoder **414** may detect and provide haptic feedback for wrist pitch. The motor/encoders **404**, **406**, **410**, **412** are arranged in a manner similar to described above with respect to the motor/encoder **402**.

Manipulator ends **420**, **422** correspond with manipulator ends of a robotic actuator. The manipulator ends **420**, **422** include contact portions **424**, **426** (e.g., cylinders), to provide opposing surfaces by which movement of the manipulator ends by the surgeon in various directions is facilitated. The manipulator ends **420**, **422** are respectively coupled to the motor/encoders **410**, **412**. The manipulator ends **420**, **422** may be positioned adjacent to each other with the motor/encoders **410**, **412** extending away from the manipulator ends **420**, **422** in different (in some cases opposite) directions. Opposing ends of the motor/encoders **410**, **412** may be secured to a frame **428**, which may be C shaped.

The frame **428** may be secured to the motor encoder **414** via a frame member **430**. The frame member **430** may be secured to the frame **428** at a central point of the frame **428** such that a rotational axis is centered. The motor/encoder **414** may also be coupled to a frame member **432**. Thus, the motor/encoder **414** may detect rotational movement of the frame member **430** with respect to the frame member **432** thereby detecting rotational movement of the entire assembly including the manipulator ends **420**, **422** and the motor/encoders **410** and **412**.

The frame member **432** may be coupled to the motor/encoder **406** and may include a bend (for example, approximately 90 degrees). Thus, the motor/encoder **406** can detect rotational movement of the entire assembly including the manipulator ends **420**, **422** and the motor/encoders **410**, **412** and **414**.

The motor/encoder **406** may be secured to a first portion **434** of the linear guide rail **409**, which includes the first portion **434**, the carriage **435** and the second portion **438**, for example via the frame member **436**. As described above, the motor/encoder **408** is coupled to the linear guide rail **409** to detect movement of the first portion (e.g., a sliding linear guide rail) **434** via a gear running on the second portion (e.g., a rack) **438** to detect movement of the first portion **434** relative to the carriage **435**, which may be stationary, mounted to the frame member **441**. Thus, the motor/encoder **408** can detect extension/retraction of the entire assembly including the manipulator ends **420**, **422** and the motor/encoders **406**, **410**, **412** and **414**.

The motor/encoder **404** may be coupled to the motor/encoder **408** via the bent frame member **441**, which may be bent approximately 90 degrees. Thus, the motor/encoder **404** can detect rotational movement of the entire assembly including the manipulator ends **420**, **422** and the motor/encoders **406**, **408**, **410**, **412** and **414**. The motor/encoder **402** may be coupled to the motor/encoder **404** via the joint element **403**. The joint element **403** may be a frame member

or a block that couples the motor/encoders **402** and **404** at different faces thereof. Bushings/washers (e.g., **405**) may be provided between the motor/encoders **402** and **404** and the joint **403**. The motor/encoder **402** may be secured to a frame member **442**, which may be bent, for example at 90 degrees. The frame member **442** may provide the base **440**. Thus, the motor/encoder **402** may detect rotational movement of the entire assembly with respect to the base **440**.

When a position of the manipulator ends **420,422** is changed by the surgeon, the motor/encoders **402**, **404**, **406**, **408**, **410**, **412** and **414** can detect movement along the different axis of the manipulator **102** as described above. This movement can be directly correlated to movement along the respective axis of the in-vivo robotic manipulator. For example, extension of the linear guide rail **409** can directly correspond to extension of the robotic manipulator about axis **308**; rotation of the motor/encoder **414** can directly correspond to rotation about the axis **314**, etc. In particular, the degrees of movement may be constrained in a manner that corresponds to the freedom of movement of the robotic manipulator. Thus, the surgeon can easily control the precise positioning of the entire robotic actuator in addition to the relative location of the manipulator ends to the base. This allows for superior control of the robotic manipulator.

The described haptic feedback may be in the form of resistance, vibration, or other forms of feedback. The motor/encoders may also be capable of setting the manipulator **102** to a specified position. For example, at the beginning of an operation, the manipulator **102** may be driven to a starting position corresponding to the position of a corresponding robot manipulator. In this regard, the motor/encoders may have the capability of determining absolute position (for example, via a potentiometer) or relative position (for example, via a digital rotation segmented input).

The motor/encoders **402**, **404**, **406**, **408**, **410**, **412** and **414** may directly correspond on a one to one basis with the axis of movement **302**, **304**, **306**, **308**, **310**, **312** and **314** of the micro robotic actuator **350**, shown in FIG. **4C**. Thus, a surgeon's manipulator may be exactly mimicked for every axes of a corresponding in-vivo robot arm. This allows advantages such as a good feel of control and ergonomics for the surgeon.

With reference to FIG. **4C**, the base **340** of the robot manipulator **350** is generally attached to the inside of the abdominal wall, which in normal surgery will be on top. This arrangement of the manipulator end extending in a downward direction from a base of the robot manipulator may be emulated by positioning the anchor point **440** of the surgeon's manipulator **102** in the configuration as shown in FIG. **4G**. The anchor point **440** of the surgeon's manipulator may be secured to a frame having a vertical member that positions the anchor member **442** above the arm rest **116**. Thus, the surgeon's manipulator is provided in an orientation that corresponds with the orientation of the robot manipulator **340** during a surgical procedure. This orientation having a direct correspondence between the surgeon's manipulator and the robot manipulator makes direct, precision haptic feedback of each axis of movement to the surgeon possible.

Referring to FIG. **5**, an exemplary patient table **130** is shown. A plurality of the electromagnetic location fixing devices **1** may be coupled to arms **132**. The arms **132**, may be secured or coupled to the gantry **134**, which is secured or coupled to the table **130**. Thus, the whole system may move simultaneously with the patient. This allows for the changing of the position of the patient with the table intra-

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operatively without the need to undock the robotic system from the table and operations that require changes in patient position during the surgical procedure are facilitated. Also, the arms **132** may be servo driven for repositioning or adjusting an orientation of the electromagnetic location fixing devices **1**.

Referring to FIGS. **6A** and **6B**, the axis of movement of the micro robotic manipulator **2** may have several different types of configurations. In the example shown in FIGS. **6A** and **6B**, 7-axis movement is shown. The joint **13** can rotate along the axes I and II, and the arm **14** can translate along direction III. The wrist **15** can rotate along axis IV, bend along axis V and bend along axis VI. A gripper/end effector **16** may also open and close along the axis VII, which could include rotational and/or translational movement. A portion of the micro robotic manipulator **2** having a joint with rotational axis similar to that of joint **13** and axes I and II as shown in FIG. **6** is referred to as Type A as a matter of convenience and is non-limiting.

FIGS. **7A** and **7B** show another configuration of the 7-axis movement of the manipulator **2** in which joint **13** rotates along axis I in another direction. A portion of the micro robotic manipulator **2** having a joint with rotational axis similar to that of joint **13** and axes I and II as shown in FIG. **7** is referred to as Type B as a matter of convenience and is non-limiting.

The enclosure of the manipulator **2** may facilitate the insertion of the manipulator into the body and protect the robotic arm and end effector inside the manipulator during insertion. It may include a base **21** and a pair of foldable flaps **17** on both sides of the base **21**. As a non-limiting example, the flaps **17** may have a maximum diameter of 18 mm in a folded configuration. A maximum diameter of 18 mm is advantageous as it works well with an entrance port sized for use with most natural orifices.

During an initial state or insertion, the flaps are folded as shown in FIG. **8**. Before deployment of the robot arm or end effector, the flaps **17** may be unfolded by a magnetic force triggered from the corresponding electromagnetic location fixing device **1**.

The unfolding of the flaps **17** may be triggered by heat of the abdominal wall, by external radiation or by externally supplied power. For example, the base **21** may include a heating device activated by the supply of electrical current or by reception of a radiative energy from a transmitter included in the electromagnetic location fixing device **1**. During removal from the body the flaps **17** may refold by cooling. The cooling may be effected by removing the electrical current or transmitted radiation supplied to the heating device and/or separating the manipulator **2** from the abdominal wall. The heating and cooling can also be achieved by other methods such as a thermo-electric heater/cooler, heat pipes, etc. This operation may be reversed with folding being triggered by heating and unfolding being triggered by cooling.

Alternatively or in addition, the flaps **17** may be a laminate of two materials having different coefficients of thermal expansion. Thus, as the flaps **17** are heated and cooled, the materials expand and contract at different rates causing the flaps **17** to fold and unfold. The materials may be metal alloys. The flaps **17** may be constructed from a shape memory alloy.

Alternatively or in addition, following the operation, the flaps **17** may be re-folded by manipulating the flaps **17** using another manipulator.

Alternatively or in addition, the flaps **17** may have a spring effect to assist in opening or closing the flaps and

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holding the flaps folded. For example, the flaps **17** may have a spring effect with a resultant force that tends to fold the flaps **17**. In the presence of the fixing device **1**, the spring effect is not strong enough to hold the flaps **17** folded and the flaps **17** are unfolded by the magnetic force. When the fixing device **1** is removed, the spring effect may cause the flaps **17** to fold.

Depending on the condition of the abdominal wall, translation motion of the flaps **17** may be provided by rollers on the flaps **17** (for example as shown by flaps **24** in FIG. **24**) that are magnetically switchable or electrically actuatable.

Translation motion of the manipulator **2** may be provided by electromagnetic levitation. For example, the attractive force between the manipulator **2** and the electromagnetic location fixing device **1** may be lessened or reversed to permit movement with respect to the abdominal wall. The electromagnetic location fixing device **1** may then be moved on the abdominal wall by a servo or magnetic transport (similar to the electromagnetic fixing device **26** and base **25** shown in FIG. **24**).

In the case of magnetic transport, magnets may be provided in the electromagnetic location fixing device **1**. An externally supplied magnetic field is supplied to interact with the magnets of the electromagnetic location fixing device **1** or **26** to cause the electromagnetic location fixing device **1** to move in an X-Y direction and be repositioned with respect to the abdominal wall.

Depending on the purpose of the manipulator during operation, the end effector of the manipulator **2** may be adapted to a gripping device **16**, an imaging device, such as a 2D video camera **18** or a 3D stereoscopic video camera **19**, or other devices. In the case of a 2D or 3D camera, the camera may rotate along two perpendicular axes to acquire a 2D planar or 3D stereoscopic view in different orientations. Examples of two different types of configurations are shown in FIGS. **9** and **12** (Type A) and FIGS. **10** and **13** (Type B). The enclosure of the camera may facilitate the insertion of the manipulator into the body and protect the 2D camera or 3D camera inside the manipulator during insertion. During initial state or insertion of the 2D or 3D camera, the flaps are folded as shown in FIG. **11** and FIG. **14** respectively. As a non-limiting example, the flaps may have a maximum diameter of 18 mm. A maximum diameter of 18 mm is advantageous as it works well with an entrance port sized for use with most natural orifices. Before deployment of the 2D camera, the flaps **17** are unfolded by a magnetic force triggered from the corresponding remotely controlled electromagnetic location fixing device **1**. A spring loaded rotational joint **20** may be included for a 3D camera, as shown in FIG. **14A**.

FIG. **15** is a perspective view of an exemplary 3D camera **150**. The camera **150** may include 3 parts: a camera body **152**, an extendable linkage bar **154** and a foldable magnetic anchorage **156**. The camera body **150** may include a swivel head **158** and two camera lenses **160**. The camera lenses **160** may be spaced apart along a major axis of the swivel head **158** and provide a 3D image. The major axis of the swivel head may coincide with a longitudinal axis of the camera **150** in its folded configuration. Spacing the camera lens along the longitudinal axis or "side" accommodates both of the camera lenses **160**, thereby providing 3D imagery not otherwise possible, in the limited diameter available in the implantable device. When a forward looking view is needed, the swivel head **158** can swing approximately 90 degrees (or more) to allow the "side" looking cameras to look forward.

A flexible linkage **162**, which may be a hinge, is linked to a body part **164**, which may be a tube or tube-like control

unit. The body part **164** is linked to the extendable linkage bar **154** via a flexible linkage **166**, which may be a hinge. The extendable linkage bar **154** extends and retracts to allow positioning of the camera body **152** near to the surgical field. An opposite end of the extendable linkage bar **154** is linked, and in some cases locked, to the foldable magnetic anchorage **156**, for example, through a 2-axis flexible linkage **168a** and **168b**. The flexible linkages **162**, **166**, **168a** and **168b** may be servo driven. The foldable magnetic anchorage **156** may be secured on the abdominal/body wall, for example by activating an external magnet or positioning a permanent magnet outside the abdominal wall.

The flexible linkages **162** and **166** allow the camera **150** to bend and position in difficult and confined spaces while being secured by the anchorage **156**. The foldable magnetic anchorage **156** may also be swiveled slightly with a center of rotation at the abdominal wall, for example by swiveling the external magnetic anchor, to facilitate slight sideway movement of the camera for clearer vision of an area of interest.

FIG. **16** show an exemplary micro robotic actuator **170** having 7 degrees of freedom and multiple axis of movement provided by the joints **172**, **174**, **178** and **180**.

Additional anchoring force may be provided to the electromagnetic location fixing device **1**. For example, for an obese patient with a thick abdominal wall (e.g., 50 mm thick or more), it may be difficult to sufficiently secure the electromagnetic location fixing device **1** to the manipulator **2** for precise motion during a surgical procedure. It is important that a stable platform be provided for secure anchorage of the miniature robots. Also, space available to accommodate the manipulators **2** having a small profile is limited. Thus, providing for external actuation may be desirable to provide sufficient torque for seven full axes of movement in the gripping and moving of organs or tissues during a surgical operation.

FIG. **17** shows an exemplary micro robotic actuator **1000** in a folded state including the housing **1002**. FIG. **18** shows the exemplary micro robotic actuator **1000** in a folded state without the housing **1002**. FIG. **19** shows an exploded view of the micro robotic actuator **1000**. FIG. **20** shows an exploded view of the end effector **1004** of the micro robotic actuator **1000**. FIG. **21** shows the micro robotic actuator **1000** in an unfolded state. FIG. **22** shows the micro robotic actuator **1000** in an unfolded state without the housing **1002**. The following discussion refers to FIGS. **17-22** generically unless otherwise noted.

The micro robotic actuator **1000** includes the actuator/motors **1006**, **1008**, **1010**, **1012**, **1014**, **1016** and **1018**. The actuator/motors **1006**, **1008**, **1010**, **1012**, **1014**, **1016** and **1018** provide in-vivo generation of force for the degrees of freedom (for example, seven) in an overall package size suitable for easy insertion into the human body through a single entrance port. For example, the micro robotic actuator **1000** in a folded configuration may be generally cylindrical with a diameter of 18 mm or less and a length of 200 mm or less.

In the exemplary micro robotic actuator **1000** and also with reference to FIGS. **16B** and **16D**, the actuator/motor **1006** may provide rotation about the axis II at the joint **172**; the actuator/motor **1008** may provide rotation about the axis I at the joint **174**; actuator/motor **1010** may provide rotation about the axis IV at the joint **177**; actuator/motor **1012** may provide extension and retraction along the axis III at the joint **175**; actuator/motor **1014** may provide gripping action along the axis V at the joint **180a**; the actuator/motor **1016** may

provide gripping action along the axis VI at the joint **180b**; and the actuator/motor **1018** may provide rotation about the axis VII at the joint **178**.

For example, DC servomotors coupled with planetary gearboxes, spur gears and 90 degree intersecting worm gears may be installed at joints **172** and **174** near the manipulator base. Providing the servomotors near the joints allows for greater forces to be generated. For example, two motors may be located near the base of the micro robotic actuator to provide movement about two degrees of motion at the base, one motor may be provided at a central portion of the micro robotic actuator to provide extension/retraction and three motors may be located distal to the two base motors and proximal to the end effector to provide movement about three degrees of motion at the manipulator end of the micro robotic actuator.

In some examples, 1-2 Nm torque for loading force along axis I and II may be generated. Gripping forces for forceps and needle drivers approximately ~10 N and ~20 N respectively may be generated by a combination of piezoelectric actuators and miniature DC servomotors installed in the vicinity of joints **178** and **180**. This torque and force is sufficient to perform various manipulations required by surgical operations. The extension and rotation of the manipulator may be controlled by the piezoelectric actuators and DC servomotors installed at joints **175** and **177** respectively.

The actuator/motor **1006** may be coupled to the actuator/motor **1008** via the gear assembly **1020**. The gear assembly **1020** may include a worm gear **1022** coupled to the actuator/motor **1006** and the gear **1024**. Rotation of the actuator/motor **1006** output may then provide rotation about the gear **1024** to provide the rotation about the axis II at the joint **172**. The gear assembly **1020** may also include a worm gear **1028** coupled to the actuator/motor **1006** and the gear **1028**. Rotation of the actuator/motor **1008** output may then provide rotation about the gear **1026** to provide the rotation about the axis I at the joint **174**. The gear **1024** and the gear **1028** may be coupled via the gear **1030** that may be secured to the housing **1002**. The use of a 90 degree intersecting gears **1024** and **1030** is a simple, compact and light weight way to provide X-Y swing movement along the axes I and II directions. The integrated worm and wheel mechanism may provide increased torque (e.g., 1-2 Nm) about the axes I and II.

The actuator/motors **1008** and **1010** may be fixed together directly or via the housing **1002**. The output of the actuator/motor **1010** may be coupled to the gear **1032**, which may be secured to the housing **1002**, to provide the rotation about the axis IV at the joint **177**.

The actuator/motor **1012** may be coupled to the threaded rods **1036** and **1038** via the gear system **1040**. The carriers **1042** may be fixed to the portion **1003** of the housing **1002**. As the output of the actuator/motor **1012** rotates, the carriers **1042**, which are fixed to the portion **1003**, travel along the threaded rods **1036** and **1038** thereby causing the portions **1003** and **1005** of the housing **1002** to extend or retract with respect to each other.

In some examples, the actuator/motor **1012** may be in the form of a DC servo motor or several piezo-electric motors along the circumference of the robot arm. In such an example, the threaded rods **1036** and **1038** may not be included.

The actuator/motor **1014** may be coupled to the worm gear **1050**. The worm gear **1050** may be coupled to the gear **1052**, which is coupled to the manipulator end **1054** via a pulley system **1056** that includes the wire or belt **1058**. The

actuator/motor **1016** may be coupled to the worm gear **1060**. The worm gear **1060** may be coupled to the gear **1062**, which is coupled to the manipulator end **1064** via a pulley system **1066** that includes the wire or belt **1068**. The pulley systems **1056** and **1066** end at the pulleys **1070** and **1072** respectively that share the common shaft **1074**. The pulleys **1070** and **1072** are free to rotate about the common shaft **1074** individually. The pulleys **1070** and **1072** may be coupled to the manipulator ends **1054** and **1064** via gear teeth allowing for rotation of the manipulator ends **1054** and **1064** about the common shaft **1076** to provide the gripping action along the axes V and VI at the joints **180a** and **180b**.

The gears **1052** and **1062** may be planetary gearboxes to provide a speed reduction and force multiplication of the output of the actuator/motors **1014** and **1016**. The flexibility in the pulley systems **1056** and **1066** coupled to the planetary gear boxes provide mechanical advantage as well as freedom of movement. The final connection to the manipulator ends **1054** and **1064** may be geared to increase gripping force at the tip of the manipulator. The gear ratios of the planetary gear boxes and the gearing at the manipulator ends may be different. Also, the use of dual worm gears (**1050** and **1060**) and dual actuator/motors (**1014** and **1016**) allows for increased torque at minimum distance. Thus, increased gripping forces such as 10-20 N can be realized.

The actuator/motor **1018** may be coupled to the gear **1080**, which is coupled to the gear **1082**. The gear **1082** may be secured to the portion **1007** of the housing **1002** to provide rotation about the axis VII at the joint **178**. The gear **1080** may be beveled and intersect with the gear **1082** at an approximately ninety degree angle.

The micro robotic actuator **1000** may include the circuit boards **1090** and **1092**. The circuit boards **1090** and **1092** may be flexible (e.g., flexible PCB circuitry) to conform to the shape of the housing **1002**, such as a cylinder and may be disposed along an inner wall of the housing **1002**. The circuit boards **1090** and **1092** may include driver electronics and/or integrated networking capability. Including the driver electronics and/or integrated networking capability within the micro robotic actuator **1000** allows for the reduction of external cabling to fewer conductors in a wire bundle or fewer wire bundles overall.

Referring to FIGS. **25-27**, a flexible or semi-flexible magnetic sheet **22** can be inserted into the body cavity through the entrance port **7**. When inserted, the magnetic sheet **22** may be rolled or folded. Once inserted, it can be unfolded or unrolled and positioned along the abdominal wall. The magnetic sheet **22** may be unfolded/unrolled by a mechanical mechanism or it may be unfolded/unrolled by subjecting it to a magnetic field, which may be supplied by an external electromagnet, and/or by heating or cooling through supplied energy.

The magnetic sheet **22** may be provided as a single large sheet sufficient to cover a large area of the inner abdominal wall. The magnetic sheet may also be provided by one or more small or medium sized sheets to provide coverage for a certain region of the abdominal wall.

An intra abdominal mechanical frame, for example the intra abdominal mechanical frame **27** shown in FIG. **34**, may be constructed by linking individual magnetic sheets with extendable bars to provide a stable platform for the miniature robots to operate. This intra abdominal mechanical frame may, in some cases, provide anchoring support similar to that of a large flexible magnetic sheet covering a large part of the abdomen without requiring the use of such a large sheet.

The position of the magnetic sheet **22** may be fixed by the external electromagnet **1b**. The magnetic sheet **22** provides a stable platform for the micro robotic manipulator **2** to attach to. The magnetic sheet **22** may provide a medium to concentrate magnetic flux and provide for the secure anchorage of micro robotic manipulators such as the micro robotic manipulator **2**. Exemplary materials that provide such a medium to concentrate flux include iron and silicon-iron based materials. It will be appreciated that this secure anchorage can be provided for any micro robotic manipulator as well as other related devices such as a camera. It will also be appreciated that the magnetic sheet may be used with, but is not required for, any of the described examples including those of FIGS. **1** and **23-34**.

To provide additional anchorage force, a fine wire **28** may be included. The fine wire **28**, which may be a metal wire, extends from the external electromagnet **1b** and may be introduced through the abdominal wall via, or in the form of, a fine needle. To facilitate introduction of the fine metal wire **28** via a needle or hypodermic syringe, the wire **28** may have a maximum diameter of 1 mm. A maximum diameter of 1 mm is preferable so that punctures remain well below a size that would be regarded an incision and leave no significant visible scarring. It will be appreciated that other materials such as flexible or rigid fibers, biocompatible polymers/plastics and multi-material composites that may or may not include a metal may be used in place of metal for the wire **28**.

As an example, the fine metal wire **28** may be provided from the external electromagnet **1b** via a circular through hole, a slot, or another aperture in the electromagnet **1b**. The hole, slot or other aperture may be provided at a center of the electromagnet **1b**.

A locking mechanism, such as a pair of inclined metal tabs having a separation less than a thickness of the fine wire **28** or a tip thereof, may be provided to releasably lock the micro manipulator **2** on the tip of the fine wire **28**. In the example of a locking mechanism using a metal tab, the metal tab may be subject to a biasing force, such as a spring, to keep the fine wire **28** locked in the micro robotic manipulator **2**. Removing the biasing force or providing a counter force may allow the fine wire **28** to be released. The release of the fine wire **28** may be provided by a remote controlled electrical actuator or by mechanical action, for example by an endoscope, inside the abdomen.

Referring to FIG. **28**, the tip of the metal wire **28** may be locked by a releasable non-return mechanism. The tip of the fine wire **28** may be enlarged to provide a more secure lock.

Referring to FIG. **29**, when the fine wire **28** is tightened at the base of the external electromagnet **1b**, the external electromagnet **1b** and the miniature robot **2** are pressed against the abdominal wall from opposite sides such that an additional locking force is provided for the micro robotic manipulator **2** to attach to the stable platform. Therefore, secure and stable movements of the micro robotic manipulator **2** are provided in carrying out the surgical operation.

An aperture may be provided in the external electromagnet **1b** through which the fine wire **28** passes. The aperture may be in the form of a slot, a cross, a large singular opening, or another shape. Providing the aperture allows for the relocation of the micro robotic manipulator **2** after the fine wire **28** has been inserted in the abdominal wall without requiring a reinsertion of the fine wire **28**. Thus, the wire may be loosened allowing the movement of the external electromagnet **1b** and the micro robotic manipulator **2** and subsequently retightened to allow for the repositioning of the micro robotic manipulator **2**.



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In addition to providing additional anchorage force, the fine wire 28 may also be used to supply power or signals to/from the micro robotic manipulator 2.

Referring to FIGS. 30-33, when the miniature robot is tightly coupled to the electromagnet, movement of the micro robotic manipulator 2 may be induced by the swivel action of external electromagnet 1b. For example, the center of movement may be located at the midpoint of the abdominal wall.

The external actuation can supplement the X-Y movement of micro-actuator on the micro robotic manipulator 2. Due to the leverage effect, a small angular movement of the electromagnet 1b will lead to a large two dimensional X-Y movement of the micro robotic manipulator 2. Without the tight coupling, attempts to move the micro robotic manipulator 2 in this manner would likely result in separation of the micro robotic manipulator 2 and the external electromagnet 1b and X-Y movement would not be achieved.

Referring now to at least FIGS. 35 to 43, an example embodiment of a magnetic-anchored robotic system (MRS) (hereinafter referred to as a "surgical system"), may comprise an internal anchor assembly configurable to be inserted into and positioned inside a cavity of a body. The surgical system may further comprise an external anchor assembly configurable to magnetically couple to the internal anchor assembly. The external anchor assembly may include a magnetic assembly having one or more superconducting magnets configurable to generate a magnetic field and a conductive housing for receiving the one or more superconducting magnets. The external anchor assembly may further include a temperature control section configurable to control a temperature of the one or more superconducting magnets via the conductive housing. The temperature control section may include a cryo-cooler assembly and one or more heat rods, and may also include conductive housing for the one or more superconducting magnets. The external anchor assembly may further include an external anchor body configurable to receive the magnetic assembly and the temperature control section, the external anchor body fixed in position outside of the body. The external anchor assembly may be configurable to selectively vary the magnetic field applied to the internal anchor assembly. For example, when the external anchor assembly magnetically couples to the internal anchor assembly, and when the magnetic assembly is magnetically coupled to the internal anchor assembly at a first separation distance from the internal anchor assembly, the external anchor assembly may be configurable to vary the magnitude of the magnetic field applied to the internal anchor assembly by varying the first separation distance. In this regard, the external anchor assembly may further comprise a support structure, the support structure selectively configurable to position the external anchor body outside of the body, and the magnetic field applied at the internal anchor assembly may be reduced or increased by selectively configuring the support structure to increase or reduce, respectively, the first separation distance. The surgical system may further comprise an intermediary member positioned between the external anchor assembly and the internal anchor assembly, wherein the first separation distance may be varied by selectively varying a dimension of the intermediary member. The external anchor assembly may also be configurable to selectively vary the generated magnetic field (i.e., generated by the one or more superconducting magnets). For example, the external anchor assembly may be configurable to selectively vary the generated magnetic field by varying a temperature of the one or more superconducting magnets. Furthermore, the external anchor

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assembly may be configurable to selectively diminish the generated magnetic field by increasing the temperature of the one or more superconducting magnets to be equal to or greater than a critical temperature. In respect to the one or more superconducting magnets, the magnetic assembly may comprise a plurality of superconducting magnets configured in one or more vertically stacked arrangements. The surgical system may further comprise an instrument assembly having an instrument at a first end and an instrument assembly attaching section at a second end, and the instrument assembly may be configurable to secure to the internal anchor assembly by securing an instrument assembly attaching section of the instrument assembly to the internal anchor attaching section of the internal anchor assembly. The surgical system may further comprise a controller, processor, or the like, configurable to configure a magnitude of the magnetic field applied, by the magnetic assembly, at the internal anchor assembly. This may be achieved, for example, by controlling or configuring a temperature of the one or more superconducting magnets, such as via the temperature control section (which may include one or more of the cryo-cooler assembly, one or more heat rods, a heater, and may also include the conductive housing for the one or more superconducting magnets).

Still referring to FIGS. 35 to 43, an example embodiment of an external anchor assembly for use with a magnetic-anchored robotic system (MRS) (hereinafter also referred to as a "surgical system") having an internal anchor assembly may comprise a magnetic assembly having one or more superconducting magnets configurable to generate a magnetic field and a conductive housing for receiving the one or more superconducting magnets. The external anchor assembly may further comprise a temperature control section configurable to control a temperature of the one or more superconducting magnets via the conductive housing. The external anchor assembly may further comprise an external anchor body configurable to receive the magnetic assembly and the temperature control section, the external anchor body fixed in position outside of the body. The magnetic assembly of the external anchor assembly may be configurable to magnetically couple to the internal anchor assembly via the magnetic field.

Still referring to FIGS. 35 to 43, and in particular, FIGS. 42 and 43, a method of configuring a magnetic-anchored robotic system (MRS) (hereinafter also referred to as a "surgical system") may comprise providing an internal anchor assembly, the internal anchor assembly configured to be inserted into and positioned inside a cavity of a body. The method may further comprise providing an external anchor assembly. The external anchor assembly may include a magnetic assembly having one or more superconducting magnets configurable to generate a magnetic field and a conductive housing for receiving the one or more superconducting magnets. The external anchor assembly may further include a temperature control section having a heat rod and a cryo-cooler, the heat rod in contact with the conductive housing and the cryo-cooler. The external anchor assembly may further include an external anchor body configurable to receive the magnetic assembly and the temperature control section. The method may further include preparing the one or more superconducting magnets by providing a charging field (or magnet) and configuring the cryo-cooler to a first temperature, the first temperature operable to bring a temperature of the one or more superconducting magnets to be lesser than or equal to a second temperature. The preparing of the one or more superconducting magnets may further include bringing the magnetic assembly to the charging

field. The preparing of the one or more superconducting magnets may further include ramping up a magnetic field generated by the charging field at a first rate. The preparing of the one or more superconducting magnets may further include configuring the cryo-cooler to a third temperature less than the first temperature, the third temperature operable to bring the temperature of the one or more superconducting magnets to be lesser than or equal to a fourth temperature less than the second temperature. The preparing of the one or more superconducting magnets may further include ramping down the magnetic field generated by the charging field at a second rate. The preparing of the one or more superconducting magnets may further include removing the magnetic assembly from the charging field when the magnetic field generated by the charging field reaches a final magnetic field value. The method may further comprise inserting the internal anchor assembly into a cavity of a body and positioning the internal anchor assembly at an interior surface of the cavity of the body. The method may further comprise, after the preparing of the one or more superconducting magnets, configuring a support structure to position the external anchor assembly at an exterior surface of the body based on the positioning of the internal anchor assembly, and magnetically coupling the external anchor assembly to the internal anchor assembly via a magnetic field generated by the one or more superconducting magnets of the magnetic assembly. The method may further comprise providing an instrument assembly, the instrument assembly having an instrument at a first end and an instrument assembly attaching section at a second end. The method may further comprise inserting the instrument assembly into the cavity of the body. The method may further comprise securing the instrument assembly to the internal anchor assembly by securing an internal anchor attaching section of the internal anchor assembly to the instrument assembly attaching section. The method may further comprise configuring a controller to configure a magnitude of the magnetic field applied, by the magnetic assembly, at the internal anchor assembly. The method may further comprise configuring the controller to configure the temperature control section to control the temperature of the one or more superconducting magnets.

These and other example embodiments of the surgical system will now be further described in more detail below with reference to at least FIGS. 35 to 43.

As illustrated in at least FIG. 35A, FIG. 35B, FIG. 35C, and FIG. 35D, an example embodiment of the surgical system 3500, including those described above and in the present disclosure, may comprise an external anchor assembly 1 (e.g., element 1 recited in the present disclosure). Example embodiments may further comprise an internal anchor assembly 17 (e.g., elements 17, 21, 22, and/or 156 recited in the present disclosure), as illustrated in FIG. 35D. Example embodiments may further comprise an instrument assembly 2 (e.g., elements 2, 18, 19, 150, and/or 1000 recited in the present disclosure), as illustrated in at least FIG. 35D. Example embodiments may further comprise a support structure 1c, as illustrated in at least FIG. 35D. The support structure 1c may be a part of the external anchor assembly 1 (e.g., element 1 recited in the present disclosure) and/or a standalone unit. Example embodiments may further comprise an intermediary member 1d, such as an inflatable bladder, or the like, as illustrated in at least FIG. 35D. The intermediary member 1d may be a part of the external anchor assembly 1 (e.g., element 1 recited in the present

disclosure) and/or a standalone unit. These elements of the surgical system are further described below with reference to FIGS. 35 to 43.

Internal Anchor Assembly (e.g., Elements 17, 21, 22, and/or 156)

The internal anchor assembly 17 (e.g., elements 17, 21, 22, and/or 156 recited in the present disclosure) may be any internal anchor, or the like, operable to magnetically couple (or magnetically secure) to the external anchor assembly 1 (e.g., element 1 recited in the present disclosure) in example embodiments. For example, the internal anchor assembly 17 may be an anchor comprising ferromagnetic portions that is foldable, bendable, and/or rollable in shape and/or configuration, and may include memory shape alloy.

In example embodiments, the internal anchor assembly 17 may be attached to and/or integrated with the instrument assembly 2. The internal anchor assembly 17 may also be attachable to and removable or detachable from the instrument assembly 2 in example embodiments. In example embodiments wherein the internal anchor assembly 17 is attachable to and removable from the instrument assembly 2, the internal anchor assembly 17 may comprise an internal anchor attaching section and the instrument assembly 2 may comprise an instrument assembly attaching section. In this regard, the instrument assembly 2 may be configurable to secure to the internal anchor assembly 17 by securing the instrument assembly attaching section to at least the internal anchor attaching section.

The internal anchor assembly 17 may be configurable to be inserted into a cavity of a body, such as via entrance port 7 (e.g., element 7, 207', and/or 207" recited in the present disclosure), and positioned inside the cavity of the body, as illustrated in FIG. 35D. The internal anchor assembly 17 may also be configurable to be removed from the cavity of the body, such as via entrance port 7 (e.g., element 7, 207', and/or 207" recited in the present disclosure).

In an example embodiment, the internal anchor assembly 17 may be formed in any one or more of a plurality of shapes, or combinations thereof, including shapes that are square, rectangular, circular, oval, hexagonal, etc. For example, a shape of the internal anchor assembly 17 may be selected based on, among other things, one or more of: a shape of a portion of the external anchor assembly 1, such as end 3502a; a shape of a portion of the magnetic assembly 3510; a shape of a portion of the conductive housing 3514; a shape of the configuration of the one or more superconducting magnets 3512; a shape of a portion of an entrance port 7 (e.g., element 7, 207', and/or 207" recited in the present disclosure); etc.

A width of the internal anchor assembly 17 may be between about 5 mm to 75 mm, a length of the internal anchor assembly 17 may be between about 5 mm to 75 mm, and a thickness of the internal anchor assembly 17 may be between about 0.1 mm to 10 mm. The aforementioned dimensions of the internal anchor assembly 17 may be a maximum dimension, an average dimension, a typical dimension, a minimum dimension, etc.

The internal anchor assembly 17 (e.g., elements 17, 21, 22, and/or 156 recited in the present disclosure), including the internal anchor attaching section, may be formed using any one or more of a plurality of strong ferromagnetic materials in the form of solid blocks, bars, cylinders, and/or powder impregnated resins.

The internal anchor assembly 17 may be operable to magnetically couple (or magnetically secure) to the external anchor assembly 1 in example embodiments.

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The External Anchor Assembly (e.g., Element 1)

In an example embodiment, the external anchor assembly **1** (e.g., element **1** recited in the present disclosure) may comprise one or more external anchor bodies (e.g., element **3502**). The external anchor assembly **1** may further comprise one or more magnetic assemblies (e.g., element **3510**). The external anchor assembly **1** may further comprise one or more cryo-cooler assemblies, coldheads, or the like (or "cryo-cooler assembly") (e.g., element **3520**). The external anchor assembly **1** may further comprise one or more heat rods (e.g., element **3530**). The external anchor assembly **1** may further comprise one or more support rods (e.g., element **3540**). The external anchor assembly **1** may further comprise one or more connecting sections (e.g., element **3508**). The external anchor assembly **1** may further comprise one or more support clamps (e.g., element **3550**). The external anchor assembly **1** may further comprise one or more intermediary members (e.g., element **1d**). The external anchor assembly **1** may further comprise one or more support structures (e.g., element **1c**). These elements of the external anchor assembly **1** are further described below with reference to the Figures.

The External Anchor Body (e.g., Element **3502**)

As illustrated in at least FIGS. **35A-D**, FIG. **37C**, FIG. **38A**, FIG. **38B**, and FIG. **38C**, the external anchor body **3502** may collectively comprise a body, such as an elongated body, having a first end **3502a**, a second end **3502b**, and one or more walls forming a substantially hollow interior. The external anchor body **3502** may comprise a main external anchor body **3504**. The external anchor body **3502** may further comprise a cryo-cooler housing **3506**. The external anchor body **3502** may further comprise a connector section **3508** for connecting the main external anchor body **3504** to the cryo-cooler housing **3506**. It is to be understood in the present disclosure that one or more of the main external anchor body **3504**, the cryo-cooler housing **3506**, and the connector section **3508** may be formed as a unitary article, or alternatively, as several separate elements, without departing from the teachings of the present disclosure. These elements of the external anchor body **3502** are further described below with reference to the Figures.

The main external anchor body **3504** may be operable to receive and house the magnetic assembly **3150** at the first end **3502a**. The main external anchor body **3504** may be further operable to receive and house the one or more heat rods **3530**. The main external anchor body **3504** may be further operable to receive and house the one or more support rods **3540**. The main external anchor body **3504** may be further operable to receive, house, and secure in place a support clamp **3550**, which, in example embodiments, may be operable to secure the one or more heat rods **3530** and/or the one or more support rods **3540** in place within the main external anchor body **3504**.

The main external anchor body **3504** may be formed in any one or more of a plurality of shapes, or combinations thereof, including shapes that have one or more cross sections that is/are circular, elliptical, square, rectangular, hexagonal, etc. For example, a shape of the main external anchor body **3504** may be selected based on, among other things, one or more of: a shape of a portion of the magnetic assembly **3150**; a shape of a portion of the conductive housing **3514**; a shape of the configuration of the one or more superconducting magnets **3512**; a shape of a portion of the cryo-cooler assembly **3520**; a shape of a portion of the cryo-cooler **3522**; a shape of a portion of the one or more

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heat rods **3530**; a shape of a portion of the one or more support rods **3540**; a shape of the connector section **3508**; etc.

The main external anchor body **3504** may be operable to receive at least a portion of and secure to the support structure **1c** in example embodiments. The main external anchor body **3504** may be further operable to fixably secure to the intermediary member **1d** at first end **3502a**.

A length (or height) of the main external anchor body **3504** may be between about 500 mm to 1500 mm, a diameter of the main external anchor body **3504** may be between about 35 mm to 85 mm, and a wall thickness of the main external anchor body **3504** may be between about 1 mm to 5 mm. The aforementioned dimensions of the main external anchor body **3504** may be a maximum dimension, an average dimension, a typical dimension, a minimum dimension, etc.

The main external anchor body **3504** may be formed using any one or more of a plurality of materials, such as surgical-grade metals, stainless steel, etc.

In an example embodiment, the cryo-cooler housing **3506** may be formed in any one or more of a plurality of shapes, or combinations thereof, including shapes that have one or more cross sections that is circular, elliptical, square, rectangular, hexagonal, etc. For example, a shape of the cryo-cooler housing **3506** may be selected based on, among other things, one or more of: a shape of a portion of the cryo-cooler **3522**; a shape of a portion of the one or more heat rods **3530**; a shape of the connector section **3508**; a shape of a portion of the magnetic assembly **3510**; a shape of a portion of the conductive housing **3514**; etc.

A length (or height) of the cryo-cooler housing **3506** may be between about 95 mm to 250 mm, a diameter of the cryo-cooler housing **3506** may be between about 85 mm to 300 mm, and a wall thickness of the cryo-cooler housing **3506** may be between about 2 mm to 10 mm. The aforementioned dimensions of the cryo-cooler housing **3506** may be a maximum dimension, an average dimension, a typical dimension, a minimum dimension, etc.

The cryo-cooler housing **3506** may be formed using any one or more of a plurality of materials, such as surgical-grade metals, aluminum, stainless steel, plastics, etc.

Although example embodiments depict the main external anchor body **3504** and the cryo-cooler housing **3506** to be two separate elements, it is to be understood in the present disclosure that example embodiments of the main external anchor body **3504** and the cryo-cooler housing **3506** may be formed as a unitary article, or alternatively, as more than two separate elements, without departing from the teachings of the present disclosure.

In an example embodiment, the connector section **3508** is for use in connecting and securing the main external anchor body **3504** with the cryo-cooler housing **3506**. It is to be understood in the present disclosure that the main external anchor body **3504** may be directly connectable and securable to the cryo-cooler housing **3506** in example embodiments without the need for connector section **3508** and without departing from the teachings of the present disclosure.

The connector section **3508** may be formed in any one or more of a plurality of shapes, or combinations thereof, including shapes that have one or more cross sections that is/are circular, elliptical, square, rectangular, hexagonal, etc. For example, a shape of the connector section **3508** may be selected based on, among other things, one or more of: a shape of a portion of the cryo-cooler assembly **3520**; a shape of a portion of the cryo-cooler housing **3506**; a shape of a







The method (e.g., method **4200**) may further comprise preparing the one or more superconducting magnets (e.g., action **4230**).

As illustrated in FIG. **43**, a method (e.g., method **4300**, action **4230**) of preparing the one or more superconducting magnets may include providing a charging magnet (e.g., action **4310**). The charging magnet provided may be any magnet operable to interact (or charge) the one or more superconducting magnets, and may include an electromagnet, superconducting magnet, or the like.

The method (e.g., method **4300**) may further comprise configuring the cryo-cooler assembly (i.e., cryo-cooler) to a first temperature (e.g., action **4320**). The first temperature may be between about 90 to 300 K. In an example embodiment, the first temperature may be a temperature operable to bring a temperature of the one or more superconducting magnets to be lesser than or equal to a second temperature. The second temperature may be between about 90 to 100 K. For example, the first temperature may be a set point temperature of about 90 K and the second temperature may be a temperature of about 100 K.

The method (e.g., method **4300**) may further comprise bringing the magnetic assembly to the charging field (or magnet) (e.g., action **4330**). For example, the end **3502a** of the external anchor assembly **3502** to which the magnetic assembly **3510** is positioned may be brought in contact with or near to the charging field.

The method (e.g., method **4300**) may further comprise ramping up (or gradually increase) a magnetic field generated by the charging field at a first rate (e.g., action **4340**). The first rate may be between about 0.01 to 5 Tesla/minute. For example, the first rate may be a rate of about 0.5 Tesla/minute.

The method (e.g., method **4300**) may further comprise configuring the cryo-cooler assembly (i.e., cryo-cooler) to a third temperature (e.g., action **4350**). The third temperature may be less than the first temperature. The third temperature may be between about 50 K to 65 K. In an example embodiment, the third temperature may be a temperature operable to bring the temperature of the one or more superconducting magnets to be lesser than or equal to a fourth temperature. The fourth temperature may be less than the second temperature. The fourth temperature may be between about 50 K to 65 K. For example, the third temperature may be about 50 to 70 K and the fourth temperature may be about 60 to 80 K.

The method (e.g., method **4300**) may further comprise ramping down (or gradually decreasing) the magnetic field generated by the charging field at a second rate (e.g., action **4360**). The second rate may be between about 0.01 to 5 Tesla/minute. For example, the second rate may be a rate of about 0.5 Tesla/minute.

The method (e.g., method **4300**) may further comprise removing the magnetic assembly from the charging field (e.g., action **4370**). That is, the end **3502a** of the external anchor assembly **3502** to which the magnetic assembly **3510** is housed may be brought (or moved) away from the charging field. In an example embodiment, this action (e.g., action **4370**) may be performed when (i.e., at the time of, or after) the magnetic field generated by the charging field reaches a final magnetic field value. The final magnetic field value may be between about 0 to  $\pm 0.1$  Tesla. For example, the final magnetic field value may be about 0 Tesla.

Either before, during, or after completion of the preparing of the one or more superconducting magnets (e.g., method **4300** and action **4230**), the internal anchor assembly may be

inserted into a cavity of a body (i.e., patient body) and positioned at an interior surface of the cavity of the body.

Either before, during, or after completion of the preparing of the one or more superconducting magnets (e.g., method **4300** and action **4230**), a support structure may be configured. The support structure may include example embodiments of the support structure (e.g., element **1c**) and/or controllable swivel assembly (e.g., element **1c'**) described above and in the present disclosure. The support structure may be configured to receive and fixably position the external anchor assembly at an exterior surface of the body (i.e., patient body). In example embodiments, the external anchor assembly is fixably positioned based on the position or desired position of the internal anchor assembly. For example, after the internal anchor assembly is inserted into and positioned inside the cavity of the body, the support structure may fix the position of the external anchor assembly based on the position of the internal anchor assembly inside the cavity of the body. As another example, before (or at the same time as) the internal anchor assembly is inserted into and positioned inside the cavity of the body at a desired position, the support structure may fix the position of the external anchor assembly based on the desired position of the internal anchor assembly inside the cavity of the body.

The external anchor assembly may then be magnetically coupled to the internal anchor assembly via the magnetic field generated by the one or more superconducting magnets of the magnetic assembly.

Either before, during, or after the insertion and positioning of the internal anchor assembly in the cavity of the body (i.e., patient body), an instrument assembly may be provided. The instrument assembly may include example embodiments of the instrument assembly (e.g., elements **2**, **18**, **19**, **150**, and/or **1000**) described above and in the present disclosure. In an example embodiment, the instrument assembly may comprise an instrument (such as an end effector, gripper, cutting tool, camera, video camera, light, etc.) at a first end of the instrument assembly and an instrument assembly attaching section at a second end of the instrument assembly.

Either before, during, or after the insertion and positioning of the internal anchor assembly in the cavity of the body (i.e., patient body), the instrument assembly may be inserted into the cavity of the body. After the internal anchor assembly is inserted into the cavity of the body, the instrument assembly may be secured to the internal anchor assembly. The instrument assembly may be secured to the internal anchor assembly by securing an internal anchor attaching section of the internal anchor assembly to the instrument assembly attaching section.

It is recognized in the present disclosure that the internal anchor assembly and the instrument assembly may be already attached/secured together, or alternatively, formed as a unitary article in example embodiments.

In an example embodiment, the magnetic assembly may be configurable to generate a magnetic field with a magnitude of about 0 to 1.5 Tesla (when measured at the anchor surface). The magnetic assembly may be configurable to generate a peak or all of the magnetic field in a particular or desired direction, area, or volume (i.e., towards the internal anchor assembly and/or the desired position of the internal anchor assembly within the cavity of the patient body).

In an example embodiment, the external anchor assembly may be configurable to selectively vary the magnetic field applied to the internal anchor assembly between a magnitude of about 0 to 2 Tesla. For example, when the external anchor assembly magnetically couples to the internal anchor

assembly, and when the magnetic assembly is magnetically coupled to the internal anchor assembly at a first separation distance, such as a first separation distance of about 0 to 50 mm, from the internal anchor assembly, the external anchor assembly may be configurable to vary the magnitude of the magnetic field applied to (or at) the internal anchor assembly by varying the first separation distance. In an example embodiment, the magnetic field applied at the internal anchor assembly may be reduced by selectively configuring the support structure to increase the first separation distance. Similarly, the magnetic field applied at the internal anchor assembly may be increased by selectively configuring the support structure to decrease the first separation distance.

As another example, the first separation distance may be varied by the intermediary member. For example, if the intermediary member is an inflatable bladder, the first separation distance may be varied by varying a dimension (such as thickness) of the intermediary member.

In an example embodiment, the external anchor assembly may be configurable to selectively vary the generated magnetic field between a magnitude of about 0 to 5 Tesla. The external anchor assembly may be configurable to selectively vary the generated magnetic field by varying a temperature of the one or more superconducting magnets. Furthermore, the external anchor assembly may be configurable to selectively diminish the generated magnetic field by increasing the temperature of the one or more superconducting magnets to be equal to or greater than a critical temperature of between about 90 to 100 K. In such a case, the magnetic field may be diminished to zero.

In example embodiments, when the external anchor assembly is magnetically coupled to the internal anchor assembly via the applied magnetic field and the instrument assembly is secured to the internal anchor assembly, the instrument of the instrument assembly is operable to provide an applied force of between about 1 to 5 N.

Example embodiments may further comprise a controller, or the like. The controller may be configurable to configure a magnitude of the magnetic field applied, by the magnetic assembly, at the internal anchor assembly. The controller may be further configurable to configure the temperature control section to control the temperature of the one or more superconducting magnets. The controller may be selectively configurable to perform the configuring and/or selective configuring of any element of the surgical system described above and in the present disclosure. Such selective configuring may be based on, among other things, user/operator instructions, feedback from user/operator instructions and/or actions, measurements and/or readings from one or more sensors and/or elements of the surgical system, historic information (such as measurements, readings, user/operator instructions, feedback from user/operator instructions and/or actions), specific patient information and/or records, pre-programmed and/or defaulted information, etc. The controller may be any device operable to communicate with one or more elements of surgical system, and may include a computing device, communication device, virtual machine, computer, node, instance, host, or machine in a networked computing environment. The controller may comprise logic stored in non-transitory computer readable medium which, when executed by controller and/or a processor of or associated with controller, is operable to perform one or more operations, configuring actions, and/or communications with one or more elements of surgical system, as described in the present disclosure. For example, controller may be operable to communicate with and/or configure one or more

of the temperature control section (including the cryo-cooler assembly), support structure, intermediary member, instrument assembly, etc.

It is to be understood in the present disclosure that one or more instrument assemblies and/or internal anchor assemblies may be inserted into and positioned inside the cavity of the body (i.e., patient body), and one or more external anchor assemblies may be configurable to magnetically couple (or magnetically secure) to the one or more internal anchor assemblies (and one or more instrument assemblies). For example, one external anchor assembly may be configurable to magnetically couple (or magnetically secure) to a plurality of internal anchor assemblies (and one or more instrument assemblies). Furthermore, a plurality of external anchor assemblies may be configurable to magnetically couple (or magnetically secure) to an internal anchor assembly (and one or more instrument assemblies).

Although the above described provision of additional anchorage force has been described in the context of a micro robotic manipulator and an external magnet, it will be appreciated that this is merely an exemplary application and the described apparatus and methods can also be applied to any of a variety of other instruments in which anchorage onto a stable platform inside a body cavity is desired.

While various embodiments in accordance with the disclosed principles have been described above, it should be understood that they have been presented by way of example only, and are not limiting. Thus, the breadth and scope of the invention(s) should not be limited by any of the above-described exemplary embodiments, but should be defined only in accordance with the claims and their equivalents issuing from this disclosure. Furthermore, the above advantages and features are provided in described embodiments, but shall not limit the application of such issued claims to processes and structures accomplishing any or all of the above advantages. In particular, and unless otherwise stated, the various features and aspects of the described embodiments may be used separately and/or interchangeably in any combination and are not limited to the arrangements described above.

For example, as referred to in the present disclosure, a controller may be any controller, computing device, processor, and/or communication device, and may include a virtual machine, computer, node, instance, host, and/or machine in a networked computing environment. Also as referred to in the present disclosure, a network, cloud, or networked computing environment may be a collection of machines connected by communication channels that facilitate communications between machines and allow for machines to share resources. Network may also refer to a communication medium between processes on the same machine. Also as referred to herein, a network element, node, or server may be a machine deployed to execute a program operating as a socket listener and may include software instances.

Furthermore, as referred to in the present disclosure, terms such as “assembly,” “apparatus,” “portion,” “segment,” “member,” “body,” “section,” “subsystem,” “system,” or other similar and/or equivalent terms should generally be construed broadly to include one part or more than one part or element attached, connected, secured, and/or coupled together.

Various terms used herein have special meanings within the present technical field. Whether a particular term should be construed as such a “term of art” depends on the context in which that term is used. For example, “connect,” “connected,” “connecting,” “connectable,” “attach,” “attached,” “attaching,” “attachable,” “secure,” “secured,” “securing,”



“securable,” “lock,” “locked,” “locking,” “lockable,” “anchor,” “anchored,” “anchoring,” “anchorable,” “install,” “installed,” “installing,” “installable,” “couple,” “coupled,” “coupling,” “in communication with,” “communicating with,” “associated with,” “associating with,” or other similar terms should generally be construed broadly to include situations where attachments, connections, installations, and anchoring are direct between referenced elements or through one or more intermediaries between the referenced elements. As another example, “un-connect,” “un-connected,” “un-connecting,” “un-connectable,” “un-attach,” “un-attached,” “un-attaching,” “un-attachable,” “un-secure,” “un-secured,” “un-securing,” “un-securable,” “unlock,” “unlocked,” “unlocking,” “unlockable,” “un-anchor,” “un-anchored,” “un-anchoring,” “un-anchorable,” “uninstall,” “uninstalled,” “uninstalling,” “uninstallable,” “uncouple,” “uncoupled,” “uncoupling,” or other similar terms should generally be construed broadly to include situations where separation, removal, and detaching are direct between referenced elements or from one or more intermediaries between the referenced elements. These and other terms are to be construed in light of the context in which they are used in the present disclosure and as one of ordinary skill in the art would understand those terms in the disclosed context. The above definitions are not exclusive of other meanings that might be imparted to those terms based on the disclosed context.

Words of comparison, measurement, and timing such as “at the time,” “equivalent,” “during,” “complete,” and the like should be understood to mean “substantially at the time,” “substantially equivalent,” “substantially during,” “substantially complete,” etc., where “substantially” means that such comparisons, measurements, and timings are practicable to accomplish the implicitly or expressly stated desired result.

Additionally, the section headings herein are provided for consistency with the suggestions under 37 C.F.R. 1.77 or otherwise to provide organizational cues. These headings shall not limit or characterize the invention(s) set out in any claims that may issue from this disclosure. Specifically and by way of example, a description of a technology in the “Background” is not to be construed as an admission that technology is prior art to any invention(s) in this disclosure. Neither is the “Summary” to be considered as a characterization of the invention(s) set forth in issued claims. Furthermore, any reference in this disclosure to “invention” in the singular should not be used to argue that there is only a single point of novelty in this disclosure. Multiple inventions may be set forth according to the limitations of the multiple claims issuing from this disclosure, and such claims accordingly define the invention(s), and their equivalents, that are protected thereby. In all instances, the scope of such claims shall be considered on their own merits in light of this disclosure, but should not be constrained by the headings set forth herein.

What is claimed is:

1. An external anchor assembly for use with a surgical system, the surgical system having an internal anchor assembly configurable to be inserted into and positioned inside a cavity of a body, the external anchor assembly comprising:  
 a magnetic assembly having one or more superconducting magnets configurable to generate a magnetic field and a conductive housing for receiving the one or more superconducting magnets;  
 a temperature control section configurable to control a temperature of the one or more superconducting magnets via the conductive housing; and

an external anchor body configurable to receive the magnetic assembly and the temperature control section, the external anchor body fixably positionable outside of the body;

wherein the magnetic assembly is configurable to magnetically couple to the internal anchor assembly via the magnetic field.

2. The external anchor assembly of claim 1, wherein the magnetic assembly is configurable to generate the magnetic field with a magnitude of about 0 to 5 Tesla.

3. The external anchor assembly of claim 1, wherein the external anchor assembly is configurable to selectively vary the magnetic field applied at the internal anchor assembly between a magnitude of about 0 to 2 Tesla.

4. The external anchor assembly of claim 3, wherein, when the external anchor assembly magnetically couples to the internal anchor assembly, and when the magnetic assembly is magnetically coupled to the internal anchor assembly at a first separation distance from the internal anchor assembly, the external anchor assembly is configurable to vary the magnitude of the magnetic field applied at the internal anchor assembly by varying the first separation distance.

5. The external anchor assembly of claim 3, wherein the external anchor assembly further comprises a support structure, the support structure selectively configurable to fixably position the external anchor body outside of the body,

the magnetic field applied at the internal anchor assembly is reduced by selectively configuring the support structure to increase the first separation distance, and the magnetic field applied at the internal anchor assembly is increased by selectively configuring the support structure to decrease the first separation distance.

6. The external anchor assembly of claim 3, further comprising an intermediary member positionable between the external anchor body and the internal anchor assembly, wherein the first separation distance is varied by selectively varying a dimension of the intermediary member.

7. The external anchor assembly of claim 6, wherein the intermediary member is an inflatable bladder.

8. The external anchor assembly of claim 1, wherein the external anchor assembly is configurable to selectively vary the generated magnetic field between a magnitude of about 0 to 5 Tesla.

9. The external anchor assembly of claim 8, wherein the external anchor assembly is configurable to selectively vary the generated magnetic field by varying a temperature of the one or more superconducting magnets.

10. The external anchor assembly of claim 9, wherein the external anchor assembly is configurable to selectively diminish the generated magnetic field by increasing the temperature of the one or more superconducting magnets to be equal to or greater than a critical temperature of between about 90 to 100 K.

11. The external anchor assembly of claim 1, wherein the magnetic assembly comprises a plurality of superconducting magnets configured in one or more vertically stacked arrangements.

12. The external anchor assembly of claim 11, wherein each of the superconducting magnets comprise a circular cross-sectional shape with a radius, each of the one or more vertically stacked arrangements of superconducting magnets has a collective height, and the collective height is equal to or greater than the radius.

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13. The external anchor assembly of claim 11, wherein each of the superconducting magnets comprise a hexagonal cross-sectional shape with a first distance between opposing corners,  
 each of the one or more vertically stacked arrangements  
 of superconducting magnets has a collective height,  
 and  
 the collective height is equal to or greater than the first distance between opposing corners.

14. The external anchor assembly of claim 1, wherein the one or more superconducting magnets comprise Ba, Cu, and O.

15. The external anchor assembly of claim 1, wherein the temperature control section comprises a heat rod and a cryo-cooler,  
 the heat rod is in contact with the conductive housing and the cryo-cooler,  
 the cryo-cooler is configurable to control the temperature of the superconducting magnets via the heat rod and the conductive housing,

the external anchor body includes an elongated body comprising a first end and a second end opposite the first end,

the elongated body of the external anchor body is configurable to receive the magnetic assembly at the first end,

the elongated body of the external anchor body is configurable to receive the cryo-cooler at the second end, and

the elongated body of the external anchor body is configurable to receive the heat rod at least between the first end and the second end.

16. The external anchor assembly of claim 1, further comprising an instrument assembly having an instrument at a first end and an instrument assembly attaching section at a second end,

wherein the internal anchor assembly further comprises an internal anchor attaching section, and

wherein the instrument assembly is configurable to secure to the internal anchor assembly by securing the instrument assembly attaching section to the internal anchor attaching section.

17. The external anchor assembly of claim 15, wherein, when the external anchor assembly is magnetically coupled to the internal anchor assembly via the applied magnetic field and the instrument assembly is secured to the internal anchor assembly, the instrument of the instrument assembly is operable to provide an applied force of between about 0 to 5 N.

18. The external anchor assembly of claim 1, further comprising a controller, the controller configurable to:

configure a magnitude of the magnetic field applied, by the magnetic assembly, at the internal anchor assembly;  
 and

configure the temperature control section to control the temperature of the one or more superconducting magnets.

19. A surgical system comprising:

an internal anchor assembly, the internal anchor assembly configurable to be inserted into and positioned inside a cavity of a body; and

an external anchor assembly configurable to magnetically couple to the internal anchor assembly, the external anchor assembly including:

a magnetic assembly having one or more superconducting magnets configurable to generate a magnetic

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field and a conductive housing for receiving the one or more superconducting magnets;  
 a temperature control section configurable to control a temperature of the one or more superconducting magnets via the conductive housing; and  
 an external anchor body configurable to receive the magnetic assembly and the temperature control section, the external anchor body fixably positionable outside of the body.

20. The surgical system of claim 19, wherein the magnetic assembly is configurable to generate the magnetic field with a magnitude of about 0 to 5 Tesla.

21. The surgical system of claim 19, wherein the external anchor assembly is configurable to selectively vary the magnetic field applied at the internal anchor assembly between a magnitude of about 0 to 2 Tesla.

22. The surgical system of claim 21, wherein, when the external anchor assembly magnetically couples to the internal anchor assembly, and when the magnetic assembly is magnetically coupled to the internal anchor assembly at a first separation distance from the internal anchor assembly, the external anchor assembly is configurable to vary the magnitude of the magnetic field applied to the internal anchor assembly by varying the first separation distance.

23. The surgical system of claim 22, wherein the external anchor assembly further comprises a support structure, the support structure selectively configurable to fixably position the external anchor body outside of the body,

the magnetic field applied at the internal anchor assembly is reduced by selectively configuring the support structure to increase the first separation distance, and the magnetic field applied at the internal anchor assembly is increased by selectively configuring the support structure to decrease the first separation distance.

24. The surgical system of claim 22, further comprising an intermediary member positionable between the external anchor assembly and the internal anchor assembly,

wherein the first separation distance is varied by selectively varying a dimension of the intermediary member.

25. The surgical system of claim 24, wherein the intermediary member is an inflatable bladder.

26. The surgical system of claim 19, wherein the external anchor assembly is configurable to selectively vary the generated magnetic field between a magnitude of about 0 to 5 Tesla.

27. The surgical system of claim 26, wherein the external anchor assembly is configurable to selectively vary the generated magnetic field by varying a temperature of the one or more superconducting magnets.

28. The surgical system of claim 27, wherein the external anchor assembly is configurable to selectively diminish the generated magnetic field by increasing the temperature of the one or more superconducting magnets to be equal to or greater than a critical temperature of between about 90 to 100 K.

29. The surgical system of claim 19, wherein the magnetic assembly comprises a plurality of superconducting magnets configured in one or more vertically stacked arrangements.

30. The surgical system of claim 29, wherein each of the superconducting magnets comprise a circular cross-sectional shape with a radius,  
 each of the one or more vertically stacked arrangements of superconducting magnets has a collective height,  
 and  
 the collective height is equal to or greater than the radius.

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31. The surgical system of claim 29, wherein each of the superconducting magnets comprise a hexagonal cross-sectional shape with a first distance between opposing corners, each of the one or more vertically stacked arrangements of superconducting magnets has a collective height, and the collective height is equal to or greater than the first distance between opposing corners.

32. The surgical system of claim 19, wherein the one or more superconducting magnets comprise Ba, Cu, and O.

33. The surgical system of claim 19, wherein: the temperature control section comprises a heat rod and a cryo-cooler, the heat rod is in contact with the conductive housing and the cryo-cooler, the cryo-cooler is configurable to control the temperature of the superconducting magnets via the heat rod and the conductive housing, the external anchor body includes an elongated body comprising a first end and a second end opposite the first end, the elongated body of the external anchor body is configurable to receive the magnetic assembly at the first end, the elongated body of the external anchor body is configurable to receive the cryo-cooler at the second end, and

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the elongated body of the external anchor body is configurable to receive the heat rod at least between the first end and the second end.

34. The surgical system of claim 19, further comprising an instrument assembly having an instrument at a first end and an instrument assembly attaching section at a second end, wherein the internal anchor assembly further comprises an internal anchor attaching section, and wherein the instrument assembly is configurable to secure to the internal anchor assembly by securing the instrument assembly attaching section to the internal anchor attaching section.

35. The surgical system of claim 34, wherein, when the external anchor assembly is magnetically coupled to the internal anchor assembly via the applied magnetic field and the instrument assembly is secured to the internal anchor assembly, the instrument of the instrument assembly is operable to provide an applied force of between about 0 to 5 N.

36. The surgical system of claim 19, further comprising a controller, the controller configurable to: configure a magnitude of the magnetic field applied, by the magnetic assembly, at the internal anchor assembly; and configure the temperature control section to control the temperature of the one or more superconducting magnets.

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